

HEALTH DEPARTMENT

MUSTER ROLL NO.

(From 1-6-68 To 30-6-68)

Circle No. XVI Voucher No. Dated

In continuation of Muster Roll No. R.M.R. S.R.

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate		Amount		Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		Rs.	P.	Rs.	P.	
1.	<u>Raman & Umelberg R.M.R.</u> <u>1234 1st F.M.I.</u> <u>19-8-68</u>	<u>S.R.</u>	Terminet																																				
2.	<u>Phool Singh</u> <u>1234 1st F.M.I.</u>	<u>Shivdajal.</u>	EXPERE																																				
3.	<u>Ninod & Malika</u>		[Handwritten marks]																																				
4.	<u>Mam Chand S/O</u> <u>1234 1st F.M.I.</u>		[Handwritten marks]																																				
Daily Total																																			G. Total				

Pay Rs. (Rupees)

Accountant (HG) M.O.H. Sr. A.O. Grand Total of this Muster Roll ...
 Certified that the workers mentioned in the muster roll were actually employed by me on NDMC works and they were actually paid on my identification in my presence.
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages
 Rs. P.