SL No 16
Page No. 29

Cash

Contingent Bill Number : 30310091000061

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 08-Oct-2009

Segment: GENERAL FUND

Sub Segment: CASH IN HAND

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field: (PUBLIC HEALTH) SANITA

Functionary: DIRECTOR (PH)

Payable To: Secretary,NDMC

Sanction By: Chairman

Sanctioned On: 17-Aug-2009

SanctionDetails: Office Order No. D-360/CMO(HQ) dated: 18.08.09 vide approval of Chairman No. 4876/D/PS dated: 17.08.09

Bill Status: CREATED

Narration: Payment 35 daily wagers S/K in circle No. -03 w.e.f. 01.09.09 to 30.09.09 @Rs151+CA per day

Remarks:

41/M
9/10/09

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	2308003	GARBAGE REMOVAL CLEARANCE	135726
			Gross Amount		135726

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		135726

Net Payable in Words :

Created By	neelam.uniyal	**Verified By**	
Confirmed By		**Approved By**	
Final Approved By			

4/5

HEALTH DEPARTMENT

Sheet-6

MUSTER ROLL NO. 832. (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. 41/17 Dated 9/10/09

In continuation of Muster Roll No. 790

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ... (1 30, 2 29, 3 30, 4 29, 5 29, 6 S, 7 30, 8 29, 9 29, 10 28, 11 30, 12 29, 13 S, 14 28, 15 30, 16 30, 17 29, 18 28, 19 28, 20 S, 21 29, 22 30, 23 28, 24 29, 25 28, 26 28, 27 S, 28 30, 29 28, 30 29, 31)	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
31	Sh. Shyam Kumar S/o Sh. Sukhi Beer 10/95 Tirlok Puri Delhi-91	Daily wages S.K.	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P	26 days	151KA 66	~~11774-00~~ 15766-00 3992-00	Paid LTP ALLSTED
32	Sh. Amnish S/o Sh. Nanu Ram village Kush Hiranki Delhi-36	-do-	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P	26 days	"	3992-00	Paid
33	Sh. Laxmi Narian S/o Beer Singh Q SCB Block Jhasa vill N.D.	-do-	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P	26 days	"	3992-00	Paid
34	Sh. Raj Kumar S/o Gulchandan T-91 Jhasa vill N.D.	-do-	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P	26 days	"	3992-00	Paid
35	Sh. Anand Kr. S/o Leela Ram 364 Block-B Dakshin Puri Delhi-62	-do-	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P	26 days	"	3992-00	Paid
	Daily Total		35 34 35 34 34 S 35 34 34 33 35 34 S 33 35 35 34 33 33 S 34 35 33 34 33 33 S 35 33 34	884 days	G. Total	Rs 1,35,726-00 1,31734-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		S S S S				

Entry has been made in the register on page 9 at Sr. no. 1594. Net payable Rs 1,35,726-00

Pay Rs. 1,35,726-00 (Rupees one lac thirty five thousand seven hundred twenty six only)

Accountant (HG) M.O.H. Sr. A.O

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

CANCELLED Released for Pay

VERIFIED FOR CASH/CHEQUE PAYMENT

Grand Total of this Muster Roll ... Rs. P.

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

HEALTH DEPARTMENT

Sheet-5

MUSTER ROLL NO. 832 (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 790

Accountant (HG) — CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accrding to classes	Designation	Dates From ... To ... (1 25, 2 25, 3 25, 4 24, 5 24, 6, 7 25, 8 24/15, 9 25, 10 23/15, 11 25, 12 24, 13, 14 23/14, 15 25, 16 25, 17 24, 18 23, 19 23/24, 20, 21 24/15, 22 25, 23 23/15, 24 24/15, 25 23, 26 23/24, 27, 28 25/15, 29 23/15, 30 24, 31)	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
26	Rahul S/o Mangal Singh 14/106 Lady Harding Staff Qts N.D.	Daily wages S.K.		24 days	15/HCA 66	92121 Rs 96,113-00 3685-00	Paid L.T.I Attested
27	Smt. Rishi W/o Vijay G-48 Balmiki Sadan Marg N.D.	-do-		26 days	"	3992-00	Paid R.T.I Attested
28	Sh. Mehendar Kumar S/o Sh. Ghan Shyam Dass 1512, Kalayan Was	-do-		26 days	"	3992-00	Paid Sd/- Sy Directors
29	Sh. Ganga Ram S/o Mangal Ram S/61 192 Indira Gandhi Camp Nehru Nagar	-do-		26 days	"	3992-00	Paid L.T.I Attested
30	Sh. Balwinder Singh S/o Sh. Suresh. S/37 Balmiki Sadan Mandir Marg N.D.	-do-		26 days	"	3992-00	Paid R.T.I Attested
	Daily Total		30 29 30 29 29 S 30 29 29 28 30 29 S 28 30 30 29 28 28 S 29 30 28 29 28 28 S 30 28 29	754 days	G. Total	Rs 1,15,766-00 1,11774-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Pay Rs..... (Rupees.....)

Accountant (HG) M.O.H. Sr. A.O

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees.....Balance Paid

Rs.	P.

HEALTH DEPARTMENT

Sheet-4

MUSTER ROLL NO. 832 (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 790

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accccrding to classes	Designation	Dates From ... To ... (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)	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
21	Smt. Anita w/o Satpal H-23 Harijan Basti Ant Ram Dairy Delhi	Daily wages S.K.	P P P P P S P P P P P S P P P P P P S P P P P P S P P P	26 days	157+CA 06	72315=00 B/F 76,307 3992=00	Paid
22	Smt. Sunita w/o Ram Pal 187 C.No.-101 Block Jhangir Puri Delhi	-do-	P P P P P S P P P P P S P P P P P P S P P P P P S P P P	25 days	"	3838=00	Paid R.T.I. Attested
23	Smt. Raj Kumari w/o Sanjay L-330 Dakshin Puri Delhi	-do-	P P P P P S P P P P P S P P P P P P S P P P P P S P P P	26 days	"	3992=00	Paid R.T.I. Attested
24	Smt. Geeta Rani w/o Gangadhar S/61/52 I.G. Camp Block 10 Nehara Nagar Delhi	-do-	P P P P P S P P P P P S P P P P P P S P P P P P S P P P	26 days	"	3992=00	Paid R.T.I. Attested
25	Smt. Lalita w/o Ravinder Singh C-27 Netaji Nagar N.D-1	-do-	P P P P P S P P P P P S P P P P P P S P P P P P S P P P	26 days	"	3992=00	Paid
	Daily Total		25 25 25 24 24 S 25 24 25 23 25 24 S 23 25 25 24 23 23 S 24 25 23 24 18 23 S 25 23 24	626 days	G. Total	96,113=00 92121=00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		S S				

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

HEALTH DEPARTMENT

Sheet 3

MUSTER ROLL NO. 832. (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 790

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accrding to classes	Designation	Dates From ... To ... (1 15, 2 15, 3 15, 4 15, 5 14, 6 x, 7 15, 8 15, 9 15, 10 15, 11 15, 12 14, 13, 14 14, 15 15, 16 15, 17 14, 18 13, 19 14, 20 x, 21 15, 22 15, 23 15, 24 15, 25 13, 26 14, 27 x, 28 15, 29 15, 30 14, 31)	Total 376 days	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
16	Smt. Sushma w/o Bablu E-54 New Ranjeet Nagar N. Delhi	Daily wages 5.k.	P P P P P S P A P A P P S A P P P P P S P P A A P A S P

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

Sheet-2

HEALTH DEPARTMENT

MUSTER ROLL NO. 832 (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. .... Dated ....

In continuation of Muster Roll No. 790

Accountant (HG). CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			258 days	157CA 06	~~35620=00~~ Rs39,612-00	
11-	Smt. Santosh w/o Munnalal 13 Talkatora Road N.D.	Daily Wages S.K.	21 days		3224=00	Paid (thumb impression) RTI Attested
12-	Smt. Ashwani w/o Sanjay 6/83 Bapu Dham N.D.	-do-	21 days	"	3224=00	Paid (signature) Sig. Attested
13-	Smt. Lata D/o Sri Raj Singh 1/3 Bapu Dham N.D.	-do-	24 days	"	3685=00	Paid (signature) Sig. Attested
14	Smt. Geeta w/o Kaldeep B-820 Inder Puri J.J. Colony N.D.	-do-	26 days	"	3992=00	Paid (signature) Sig. Attested
15	Kuldeep S/o Shyam 122 Balmiki Sadan Mandir Marg N.D.I	-do-	26 days	"	3992=00	Paid (signature) Sig. Attested
	Daily Total		376 days	G. Total	53737=00 (Rs57,729-00)	

Date	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
Daily Total	15	15	15	14	14	S	15	15	15	15	15	14	S	14	15	15	14	13	14	S	15	15	15	15	13	14	S	15	15	14	

Initials of person marking the daily attendance

Initials of Inspecting Officer

Pay Rs. .... (Rupees ....)

Grand Total of this Muster Roll ... ...

Rs.	P.

Accountant (HG) M.O.H. Sr. A.O

Certified that the **workers mentioned** in the muster roll were actually **employed by me** on NDMC work(s) and they were actually **paid on my** identification in my presence.

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees .... Balance Paid

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 832 (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. ..... Dated .....

In continuation of **Muster** Roll No. 790

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accccrding to classes	Designation	Dates From ... To ... (1 S, 2 S, 3 S, 4 S, 5 S, 6 S, 7 S, 8 S, 9 S, 10 S, 11 S, 12 S, 13 S, 14 S, 15 S, 16 S, 17 S, 18 S, 19 S, 20 S, 21 S, 22 4, 23 S, 24 S, 25 S, 26 S, 27 S, 28 S, 29 S, 30 S, 31)	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
6	Smt. Raj Mala W/o Sh. Ranendar 26 Balmike Sadan Mandir Marg Delhi-1	Daily wages S.K.	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P P P	26 days	15HCA 66	B/A 15814= 19806-00 3992=00	Paid
7	Sh. Mahesh S/o Sh. Pram Chand 19/274. N.D.M.C Qts Bapu Dham N.D.	- do -	P P P P P S P P P (A) P P S P P P P P P S P P P P P P S P P P P P P	25 days	"	3838=00	Paid
8	Smt. Sunita W/o Sh. Vijay B/35 Indra Nagar Bhatt	- do -	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P P P P	26 days	"	3992=00	Paid
9	Sh. Ajay S/o Man Singh 16/, Balmike Sadan Mandir Marg N.D.1	- do -	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P P P P	26 days	"	3992=00	Paid
10	Sh. Deepak S/o Sh. Nazyin 111 Balmike Sadan Mandir Marg N.D.1	- do -	P P P P P S P P P P P P S P P P P P P S P P P P P P S P P P P P P	26 days	"	3992=00	Paid
	Daily Total		10 10 10 10 10 S 10 10 10 9 10 10 S 10 10 10 10 10 10 S 10 9 10 10 10 10 S 10 10 10	258 days	G. Total	Rs 39,612-00 35620=00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		S S S				

Pay Rs..... (Rupees.....)

Accountant (HG) M.O.H. Sr. A.O

Certified that the **workers** mentioned in the muster roll were actually **employed by** me on NDMC work(s) and they were actually **paid** on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees.....Balance Paid

Rs.	P.

O.O.No:- D/360/CMO/HQ Dt. 18/8/09

(35) daily wager Sikri C/B @ 151+CA (1+6) = 7 Sheet

HEALTH DEPARTMENT

MUSTER ROLL NO. 832. (From 1/9/09 To 30/9/09)

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 790

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accrding to classes	Designation	Dates From ... To ... 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	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1	Sh. Sonu S/o Sh. Devi Shai 4.No-99 Balmiki Sadan Mandir Marg N.D.1	Daily wages S.K.	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	D D D	P P P	D	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	26 days	151+CA 66	3992=00	Paid Sonu Sign/Initials
2	Smt. Anju W/o Sh. Chander Pal 64-Balmiki Sadan Mandir Marg N.D-1	-do-	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	25 days	"	3838=00	Paid R.K. Pilanjali
3	Smt. Anita W/o Subash 1/13 D.D.A Flats East of Kailash N.D.	-do-	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	26 days	"	3992=00	Paid 3/10/11 Sign/Initials
4	Smt. USHA D/o Sh. Tilak Raj T/313/12 Hill Marg Near M.C.D. School Baljit Nagar N.D.	-do-	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	26 days	"	3992=00 3641	Paid 3641 Sign/Initials
5	Smt ASHA W/o Sh. Sanjay 21/128 Tilak Puri Delhi-91	-do-	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	26 days	"	3992=00	Paid 31/12/11 Sign/Initials
	Daily Total		5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	4	5	5	5	5	S	5	5	5		129 days	G. Total	~~15814=00~~ 19806-00	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer																																				

Pay Rs. ..... (Rupees .....)

	Rs.	P.
Grand Total of this Muster Roll		
Deduct-Payment made, as per details transferred to Register of Unpaid Wages		
Total amount paid (in words) Rupees ..... Balance Paid		

Accountant (HG) M.O.H. Sr. A.O

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.