Contingent Bill Number : 30311091000016

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 10-Nov-2009

Segment: GENERAL FUND

Sub Segment: CASH IN HAND

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE

Functionary: DIRECTOR (PH)

Payable To: Secretary,NDMC

Sanction By: The 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 51 Daily wagers S/K in circle No. -07 w.e.f. 01.10.09 to 31.10.09 @Rs151+CA per day

25/H
11/11/09

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Solid Waste Management	2308003	GARBAGE REMOVAL CLEARANCE	210986
			Gross Amount		210986

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		210986

Net Payable in Words :

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

HEALTH DEPARTMENT

Sheet-9

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. 25/17 Dated 11/11/09

In continuation of Muster Roll No. 836

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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
46	Sh Gurdeep Kumar S/o Sh Manwar R/o 26 Sunder Colony New Delhi	Peons DIW HC	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	157 CA 66/3	4143.00	Paid Gurdeep (46)
47	Sh Mukesh S/o Moti Lal R/o A 10 Pakhar Delhi	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do	4143.00	Paid (47)
48	Sh Amit S/o Sh Mohender Singh R/o C 1 Pakhar Delhi	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do	4143.00	Paid (48)
49	Sh Vijay Kumar S/o Sh Ashok R/o RG/ Village Kilkiri, Delhi Mandir	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do	4143.00	Paid (49)
50	Sachin S/o Sh Sampuran Singh R/o C6 Babulla Salam	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do	4143.00	Paid (50)
51	Lalit Kumar S/o Sh Mukesh R/o Gandhi Jadan Marg	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do	4143.00	Paid Lalit Kumar (51)
																																		1375 day	Total	2,10,986-00	
		Daily Total																																			
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

09/11/09

Entry has been made SR No. 1638 on Page No. 61

Net Payable Rs 2,10,986-00

SO(HG)

Pay Rs. 2,10,986-00 (Rupees Two lacs Ten Thousand nine hundred eighty six only). Sh. 1451 LT 9/11 and signature attested

CANCELLED

AAO (PH) AO(PH) M.O.H. Sr. A.O

Accountant (HG)

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.

VERIFIED FOR CASH/CHEQUE PAYMENT

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-8

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

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
40	Sh Dinesh S/o Sh Motilal R/o A-15 Pallia Dhani	Digar		27 days	157 p CA 6612 Dm	4143.00	Paid (40)
41	Sh Sonu S/o Sh Mangal Ram R/o J-D Thapri Deep Delhi - Bahadur Nagar	do		27 day	do	4143.00	Paid (41)
42	Sh Sunny S/o Sh Ratan Pal R/o 116 Old Anar Kali Krishna Nagar	do		27 day	do	4143.00	Paid (42)
43	Sh Jitin Kumar S/o Sh Shiv Pal R/o 4087 Gali No 6 Ajit Nagar Gandhi Nagar	do		27 day	do	4143.00	Paid (43)
44	Sh Arun S/o Sh Somar Singh R/o 69 Balmiki Sadan Mandir Nagar	do		27 day	do	4143.00	Paid (44)
45	Sh Shakti S/o Sh Sadan Ram R/o 16/352 Tilak Nagar	do		27 day	do	4143.00	Paid (45)
	Daily Total			1213 days	G. Total	1,86,198.00	
	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-7

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

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 ... (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
34	Smt Usha w/o Sh Rishi Pal R-7/113 Tilak Nagar	DICO		27 day	117 + CA 611.2 PM	4143.00	(34)
35	Smt Yogita w/o Sh Vijay Kr R-7/113 Tilak Nagar	do		27 day	do	4143.00	(35)
36	Smt Saroj Devi w/o Sh Hari Krishan R-6-9 Pehlika Dham	do		27 day	do	4143.00	(36)
37	Smt Seema Rani w/o Sh Subhash Rai Rai R-8 Ashok JJ Colony Wazir Pur	do		27 day	do	4143.00	(37)
38	Smt Shashi w/o Sh Ram Kishor R-C-327 Bhola Nath Nagar	do		27 day	do	4143.00	(38)
39	Sh Madan Lal S/o Raj Kumar R-A-177 Jawala Park Gulabi Bagh	do		27 day	do	4143.00	(39)
	Daily Total			1051 day	Total	1,61,270-00	
	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.

	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		

Sheet-6

HEALTH DEPARTMENT

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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
28	Sh Shankar S/Sh Vijay Singh R/o 277 P/S Sultan Lodhi RC	DLW Sk	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	27 day	157 + DA 61 = PM	4143.00	Paid (28)
29	Smt Urmila w/o Ms Sher Singh R/o 217 Rajendra Park Patel Nagar	do	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	27 day	do	4143.00	Paid (29)
30	Smt Anjana w/o S. Raju R/o C-L Pallia Khurd New	do	P	P	P	S	P	P	P	P	(AA)	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	25 days	do	3836.00	Paid अंजना (30)
31	Sh Charanjeet Kr S/o Mohan Lal Construction R/o 4 Balmiki Sadan New	do	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	27 day	do	4143.00	Paid चरणजीत कुमार (31)
32	Sh Sachin S/o Sh Jai Parkash R/o W.No. 1 Madanpur Khadar Delhi	do	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	27 day	do	4143.00	Paid Sachin (32)
33	Sh Dharam Vir S/o Sh Kishan Parkash R/o 86 Pallia Gram Burari New	do	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	27 day	do	4143.00	Paid धर्मवीर (33)
	Daily Total		33	33	33	5	33	33	33	33	33	33	5	33	33	33	33	33	33	5	33	33	33	33	33	33	5	33	33	33	33	33	33	889 day	G. Total	1,36,412.00	
	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

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From ..... To .....

S.No.	Name, Father's/Husband's Name & Address grouped acccrding to classes	Designation	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
24	Smt Anita w/o Sh Mahesh R/o H.No 66 Chowder Sadat Pur Narela Sect. 24	DIW Sd	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	157 + CA 66/2	4143.00	24
25	Smt Laxmi w/o Sh Suresh R/o 10/68 Trilok Puri	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	do	4143.00	25
26	Sh Anoop Kumar S/o Sh Ramesh Chand R/o 16/111 Trilok Puri	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	do	4143.00	26
27	Sh Deepak S/o Sh Surender Singh R/o 4.7/481 Kalyanpuri Delhi	do	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	do	4143.00	27
		Daily Total	27	27	27	S	27	27	27	27	27	S	27	27	27	27	27	27	27	S	27	27	27	27	27	27	S	27	27	27	27	27	27	720 days	G. Total	1,11,861.00	
		Initials of person marking the daily attendance				S						S								S							S											
		Initials of Inspecting Officer				S						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.

HEALTH DEPARTMENT

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

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 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
20	Sh Raju S/o Sh Munshi Ram R/o 213 Tihar Sanjay Amar Colony, Tilak Nagar	DHW		27 day	157 + CA 661= PM	4143.00	20
21	Sh Saurav S/o Rakesh Kr R/o 20/146 Dakshinpuri	do		27 day	do	4143.00	21
22	Smt Geeta w/o Sh Suresh R/o 69 Kanjhawala Delhi	do		27 day	do	4143.00	22
23	Smt Kavita w/o Sh Om Prakash R/o 11/289 Dakshinpuri N.D.	do		27 day	do	4143.00	23
	Daily Total			621 day	G. Total	95,289.00	
	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 3

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836.

PART-NOMINAL-ROLL

Accountant (HG) | CHIEF MEDICAL OFFICER

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	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
15	Sh Sandeep S/o Sh Rajender R/o E-16 Pallika Dham Okhla Market New Delhi	PW Sk	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	157 + CA 86/2 DM	4143-00	Paid (15) Sandeep
16	Smt Rama W/o Sh Raj Kumar R/o B-77/58 Nathu Sagar Kali Bari New Delhi	do —	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do —	4143-00	Rama (16) Paid
17	Smt Saroj W/o Sh Mohan R/o 17/96 Patel Nagar New Delhi	do —	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do —	4143-00	Saroj (17) Paid
18	Smt Mamta W/o Sh Ram Swarup R/o E-213 Sewa Nagar Delhi	do —	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do —	4143-00	HH (18) Paid
19	Smt Munni W/o Sh Bir Singh R/o 96 B Nand Nagri Mehrauli Delhi	do —	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 day	do —	4143-00	Paid (19) Munni
	Daily Total		19	19	19	S	19	19	19	19	19	19	S	19	19	19	19	19	S	19	19	19	19	19	19	S	19	19	19	19	19	19	513 day	G. Total	78,717-00	
	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.

and Total of this Muster Roll ... ...

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

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

Rs.	P.

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

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 ... (1–31)	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
10	Smt Saroj w/o Sh Vijendra R/o 151 Neb Sarai Village	DW		27 day	157 + CA 661.2 DA	4143.00	Saroj (10)
11	Sh Anil Kumar S/o Mahipal R/o H-CLXXIV Hashtal	do		27 day	do	4143.00	Anil (11)
12	Smt Shashi Devi w/o Mahipal R/o H-CLXXIV Hashtal	do		27 day	do	4143.00	Shashi (12)
13	Sh Gaurav S/o Vijay R/o 81 Balmiki Colony Mule	do		27 day	do	4143.00	Gaurav (13)
14	Sh Vicki S/o Ram Krishan R/o 157 PP Abdul Lodhi Road	do		27 day	do	4143.00	Vicki (14)
	Daily Total			378 day	G. Total	58,002.00	
	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-I

MUSTER ROLL NO. 866. (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

PART-NOMINAL-ROLL

Accountant (HG) — CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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
6	Sh Chandkar S/o Sh Laxman R/o 93 Balimiki Sadan Mandir Marg.	DMW SC		27 day	157+ CA 661/- PM	4143.00	Chandkar (6)
7	Sh Sandeep S/o Sh. Vinod Kr R/o F-317 Dakshin Puri Ms	do		27 day	do	4143.00	संदीप (7)
8	Sh Hukam Singh S/o Sh Jitender Singh R/o 1311/2 Tughlaq Puri Ms	do		27 day	do	4143.00	हुकमसिंह (8)
9	Pawan Kr S/o Sh Raj Pal Sh R/o 14/572 Dakshin Puri New	do		27 day	do	4143.00	पवन (9)
	Daily Total			243 day	G. Total	37,287.00	
	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

Rs.	P.

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

(51) clearly wages 81k, L/B @ 151+CA per day

(1+9) = 10 sheet

HEALTH DEPARTMENT

MUSTER ROLL NO. 866 (From 1/10/09 To 31/10/09)

Circle No. 7 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 836

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	Smt Neeta W/o Lalit Kr R/o 5, Gandhi Sadan Mandir Marg New Delhi	DW SK		27 day	151+CA 66/2 DN	4143.00	Neeta (1)
2	Smt Komal W/o Ashok R/o 147 Balmiki Basti	do		27 day	do	4143.00	(2)
3	Smt Deepak S/o Sh Ramprasad R/o 127 Balmiki Basti	do		27 day	do	4143.00	Deepak (3)
4	Sh Naveen Kr S/o Sh Shyam Lal R/o 10 P/S Aliganj Lodhi Rd	do		27 day	do	4143.00	(4)
5	Sh. Krishan Kr S/o Sh Dalit Kr G-66/5 Gautam Nagar Near Behind AIIMS Hospital New Delhi	do		27 day	do	4143.00	(5)
	Daily Total			135 day	G. Total	20,715.00	
	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.