

Conf ✓

Contingent Bill Number : 30311091000057

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 12-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: 04-Sep-2009

SanctionDetails: Office Order No. D-459/CMO(HQ) dated: 29.09.09 vide approval of Chairman No. 4876/D/PS dated: 04.09.09

Bill Status: CREATED

Narration: Payment 16 Daily wagers S/K in circle No. -02 w.e.f. 01.10.09 to 31.10.09 @Rs151+CA per day

Remarks:

*55/11
13/11/09*

Code	Payable To	Function	Account Code	Account Head	Amount
		Solid Waste Management	2308003	GARBAGE REMOVAL CLEARANCE	55035
Gross Amount					55085

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					55085

Net Payable in Words :

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

HEALTH DEPARTMENT

Sheet- II

MUSTER ROLL NO.

904

(From

1/10/09

To

31/10/09

Circle No. 891 Voucher No. 891

Dated

In continuation of Muster Roll No. 891

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From		Total	Rate	Amount	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment	
			To	To					
6	Sumil S/o Pyare Lal J80 80 5252	DLW	1	31	186 days	Rs. 151+ C.A.	3836 = 00	27/10/09	
7	Kamal S/o Kali Chohan J80 71 9694	"	1	31	27 days	"	4143 = 00	27/10/09	
8	Sikander S/o Kalu Ram J80 70 3013	"	1	31	19 days	"	2915 = 00	27/10/09	
9	Pooja D/o Raju J80 76 5490	"	1	31	27 days	"	4143 = 00	27/10/09	
10	Vijay S/o Rattan Lal J80 86 9524	"	1	31	Nil	Nil	Nil	Nil	
10-A	Anil Kumar - J80 86 9579 Ravi - 69 38 66	"	1	31	224 days	224 days	34371 = 00	31/10/09	
Daily Total			9	9					
Initials of person marking the daily attendance			[Handwritten initials in grid]						
Initials of Inspecting Officer			[Handwritten initials in grid]						

Pay Rs. (Rupees)

Grand Total of this Muster Roll

Accountant (HG)

M.O.N.

S.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

Rs. P.

Balance Paid

