

Contingent Bill Number : 30303080900064

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 09-Mar-2009

Segment: GENERAL FUND

Sub Segment: CASH IN HAND

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE 12

Functionary: DIRECTOR (PH)

Payable To: Secretary,NDMC

Sanction By: chairman

Sanctioned On: 12-Jan-2009

SanctionDetails:

Office order No. D-83/CMO (HQ)
dt.18.02.2009 vide approval of
Chairman No. 171/D/PS dt.
12.01.2009

Bill Status: VERIFIED

Narration:

payment to 21 Daily Wager SKs/LBs
in circle No.12 w.e.f. 18.02.2009 to
28.02.2009 @140 + 66 Per month

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	26699
Gross Amount					26699

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					26699

Net Payable in Words :

Created By	prem.sharma	Verified By	prem.sharma
Confirmed By		Approved By	
Final Approved By			

Circle No.
 In continuation of Muster Roll No.
 Voucher No.
 Date: *28/11/09*

CHIEF MEDICAL OFFICER
 Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

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								
17	Smt UShadewary Rakesh F495 J.T. Camp Tigran N. Dclm	Nadya Wager S.K							<i>10 days</i>	1498-00	<i>1985-00</i>	
18	S.K. Vinod S/o Partha S-14/B-132 J.T. Camp Okhla N. Dclm								<i>10 days</i>	1498-00		
19	Sh. RUPESH K S/o Rankishan F492 J.T. Camp Tigran N. Dclm								<i>09 days</i>	1885-00		
20	S.K. Satpal S/o Lalchand 189 Ali Ganga Lodhi Road N. Dclm								<i>08 days</i>	1148-00		
21	Smt Madhu S/o Brijendra E-IV/126 Nand Nagar N. Dclm								<i>05 days</i>	1885-00		
	Daily Total									1897-00	96639-00	

Pay Rs. *24,699-00* (Rupees) *Twenty four thousand six hundred ninety nine only*

Accountant (HG) *Asst. Dir. (PH)*
 M.O.H.
 Sr. A.O.

Grand Total of this Muster Roll ... *26699-00*
 Deduct: Payment made, as per details transferred to Register of Unpaid Wages ... *25557-00*
 Total amount paid (in words) Rupees ... *1142*
 Balance Paid

CANCELLED

VERIFIED FOR CASUALTY MEDICAL PAYMENT

Signatures and stamps of officers: *[Signatures]*
[Stamp: M. S. S. S. S.]
[Stamp: S. S. S. S.]



NEW DELHI MUNICIPAL COUNCIL

Payer's Copy

SR NO: D
192320

Receipt No: CH091004NDMC000539

Date: 06-Apr-2009

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Slan Number: 151171

RECEIPT

Function: Public Health

Sub-Field: (PUBLIC HEALTH) SANITATION

Functionary: DIRECTOR (PH)

Received From: Sh. Y. S. Rana, 3

On Account of: Wages of Smt. MEENA W/o Johnny Peter in R/o Muster Roll no. 478, Circle no. XII for the period 18.02.09 to 28.02.09

Address: S.I, Circle No. XII, NDMC, Moti Bagh, ND

Account Code	Description	Amount
3202027	MECH.OF GARBAGE REMOVAL	1142
Total Amount:		1142

Payment Mode: Cash

Total Amount in Words: One Thousand One Hundred And Forty Two Rupees Only

Cheque/DD No.:

Cheque/DD Date:

Bank:

Counter No: 1

Name of the Operator: kusum.lata

NDMC

नई दिल्ली नगर पालिका परिषद्

Signature of Authorised Officer

RECEIPT IS SUBJECT TO REALISATION OF CHEQUE/DRAFT/PAY ORDER.

SYM
V/NO 88/A
DATE 9/3/09

HEALTH DEPARTMENT

MUSTER ROLL NO. 478

(From 18/2/09 To 28/2/09)

Circle No. XII Voucher No. 188 Dated 18/2/09

In continuation of Muster Roll No. 188

PART-NOMINAL-ROLL

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							
12	Smt Maya W. Amkar Shah F-146 J.J. Corp Tighori N. Delhi	S.K.	✓																																		10 days	Rs. 1498	1498-00	<i>[Signature]</i>
13	Smt Rekha W. Rohan F-136 J.J. Corp Tighori N. Delhi	"	✓																																		10 days	Rs. 1498	1498-00	<i>[Signature]</i>
14	Smt Anifa W. Muradika F-137 J.J. Corp Tighori N. Delhi	"	✓																																		09 days	Rs. 1385	1385-00	<i>[Signature]</i>
15	Smt Amifa W. Muradika F-137 J.J. Corp Tighori N. Delhi	"	✓																																		09 days	Rs. 1385	1385-00	<i>[Signature]</i>
16	Laxmi Devi W. Chatterjee F-494 J.J. Corp Tighori N. Delhi	"	✓																																		10 days	Rs. 1498	1498-00	<i>[Signature]</i>
Daily Total																																						Rs. 5686	5686-00	
Initials of person marking the daily attendance																																								
Initials of Inspecting Officer																																								

Accountant (HG)
CHIEF MEDICAL OFFICER *[Signature]*

Pay Rs. 5686 (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. 478

(From 18/2/09 To 28/2/09)

Circle No. VII Voucher No. 108 Dated

In continuation of Muster Roll No. 107

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Total	Rate Rs.	Amount Rs. P.	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					
7	Smt Geeta W. Suresh 21/615 Kulva Puri N. Delhi	S.K.																																	08 days	Rs. 1142-00	1142-00	Smt S's Attan
8	Smt Kishor & Kamanjay Shankar D. 279 Moti Bagh N. Delhi	"																																	08 days	Rs. 1142-00	1142-00	Smt S's Attan
9	Sh. Kanwal Kr Shyama Shrinani D. 279 Moti Bagh N. Delhi	"																																	10 days	Rs. 1498-00	1498-00	Smt S's Attan
10	Smt Meenu Jomipattan 34/58 Tigralek Puri N. Delhi	"																																	08 days	Rs. 1142-00	1142-00	Smt S's Attan
11	Smt Raj Rani D. Mahanagar H. N. 70 Latuni Bori Nager N. Delhi	"																																	08 days	Rs. 1885-00	1885-00	Smt S's Attan
Daily Total																																			49 days	Rs. 6333-00	6333-00	Smt S's Attan
Ray Rs. (Rupees)		Initials of person marking the daily attendance																															Initials of Inspecting Officer					

Accountant (HG)

CHIEF MEDICAL OFFICER

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

Rs.	P.
-----	----

Co. No. 1 - 0183 CMO HQ ST 18/2/09

HEALTH DEPARTMENT

MUSTER ROLL NO. 478

(From 18/2/09 To 28/2/09)

(29) Daily wages 814, 418 @ 140 P.A.
 (143) Total 814 + 418 = 1232

MUSTER ROLL NO. 478

Dated 18/2/09

Circle No. VII Voucher No. 1228

PART-NOMINAL-ROLL

Accountant (HG) *S*

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate per day	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				

1	SH. SONLU S/O Karkh Singh W-111 Puli ka Shera Village Murhari N. Delhi	Sr. Kanak cheri																																	Rs. 120	Rs. 1285-00	<i>[Signature]</i>
2	SH. VIDHYA DEVI Jagtamba E-70 New Rojlet Nager N. Delhi	"																																	Rs. 120	Rs. 999-00	<i>[Signature]</i>
3	SH. SONLU S/O Jaganmal Hut No 135 P. Belak Sulejan Puri N. Delhi	"																																	Rs. 120	Rs. 1142-00	<i>[Signature]</i>
4	SH. RAVI S/O Rojmal 10 Jitokpur N. Delhi-91	"																																	Rs. 120	Rs. 1285-00	<i>[Signature]</i>
5	SH. NITAM S/O NARESH 237 FERT Puri Mangla Puri N. Delhi	"																																	Rs. 120	Rs. 1142-00	<i>[Signature]</i>
6	SH. VICKY S/O Vijay 1/111 Babu Shera N. Delhi	"																																	Rs. 120	Rs. 1285-00	<i>[Signature]</i>
			Daily Total																																Rs. 650	Rs. 7138-00	<i>[Signature]</i>

Pay Rs. (Rupees)

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

Grand Total of this Muster Roll ...
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Rs.	P.
-----	----

Balance Paid

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.