Contingent Bill Number : 30304091000055

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 09-Apr-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: Chairman

Sanctioned On: 12-Jan-2009

SanctionDetails: Office Order No. D-83/CMO(HQ) dated: 18.02.09 vide approval of Chairman No. 171/D/PS dated: 12.01.09

Bill Status: CREATED

Narration: Payment to 51 daily wagers SKs/LBs in circle No. -07 w.e.f. 01.03.09 to 31.03.09 @142+CA per day

33/PH
~~13/4/09~~
15/4/09

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	188914
				Gross Amount	188914

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
				Total Deduction	0
				Net Amount	188914

Net Payable in Words :

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

HEALTH DEPARTMENT

Sheet-9.

MUSTER ROLL NO. 486 (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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

S.No.	Name, Father's/Husband's Name & Address grouped accccording 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
47	Amit Kumar S/o Inder Pal R/o 381 Gali no 3 Old Dharampura Chandni Mahal Delhi	DLW																																26 day	142 CA 61/2	3758	Amit Kumar (47) Paid
48	Sh Rahul S/o Jai Bir R/o 374 Block K Dakshinpuri Delhi	DLW																																21 day		3035	Rahul (48) Paid
49	Sh Rohit Kumar S/o Ramkumar R/o 31/3-9889 Extension Gali no 31 Trilokpuri	DLW																																25 day		3614	Rohit (49) Paid
50	Sh Sanjay S/o Dharambir R/o 471 Pakka Dhar Nala	DLW																																25 day		3614	संजय (50) Paid
51	Sh Rajender S/o Babloo Dayal R/o 1/1764, Gali no 12 (Mahavir Bhag) Dhalo Mohalla Trilokpuri	DLW																																24 day		3469	(51) Paid
		Daily Total																																1307 day	G. Total	1,88,914	
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

33/PH 15/4/09

Net Payable Rs 1,88,914-00

Pay Rs 1,88,914-00 (Rupees one lac Eighty Eight thousand nine hundred fourteen only)

Accountant (HG) AAO (H) 6/4/09 CANCELLED Released for Payment AO (PH) 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 ... ... Rs. P.

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

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

Sheet-8

HEALTH DEPARTMENT

MUSTER ROLL NO. 486 (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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
42	Sh Rajender S/o Sh Lal Chand R/o 189 Aligunj New Delhi	DWSK		26 day	142-00 CA 66/2%	3758-00	Rajender Paid (42)
43	Sh Vinay Kumar S/o Sh Madan Lal R/o 31 Mustafa Aligunj New Delhi	DWSK		24 day	do	3469-00	Vinay Kumar Paid. (43)
44	Smt Usha w/o Sh Bal Krishan R/o 10/85 Green Sabzi Mohan Garden N.D.	DWSK		25 day	do	3614-00	(44) Paid.
45	Smt Rani w/o Sh Vijay Kumar R/o 50/84 Green Sabzi Mohan Garden N.D.	DWSK		25 day	do	3614-00	रानी (45) Paid
46	Smt Saroj w/o Sh Ram Kishan R/o Kathi wala Tughlakabad New Delhi.	DWSK		26 day	do	3758-00	सरोज (46) Paid
			Daily Total	1186 day	G. Total	1,71,424-00	
			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

Balance Paid

Rs.	P.

Sheet-7

HEALTH DEPARTMENT

MUSTER ROLL NO. 486 (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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
37	Sh Neeraj S/o Sh Ram Kishan R/o C-4 Kalaka Delhi	DW SK		26 days	144	3758.00	(37)
38	Sh Kamlesh Lal S/o Sh Manphool R/o 5247/05 Lohar Gali Nimmandi Pul Delhi	DW SK		26 days	144	3758.00	(38)
39	Sh Vijay S/o Sh Ram Kishan R/o C-4 Jagat Market	DW SK		26 days	144	3758.00	(39)
40	Sh Vinod Kr S/o Sh Subey Singh R/o A-153 Sakarpur Delhi	DW SK		26 days	144	3758.00	(40)
41	Sh Vijay Kr S/o Sh Raj Kr R/o A-114 Sakarpur Delhi	DW SK		26 days	144	3758.00	(41)
	Daily Total			1060 days	G. Total	153,211.00	
	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.

Sheet-6

HEALTH DEPARTMENT

MUSTER ROLL NO. 486. (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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 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
32	Sh Vikash S/o Sh Mukandlal R/o H.No. Khandhi Sadan New	DIW Sh		26 days	142+ DA 66/-	3758-00	Vikas (32)
33	Smt Sumita w/o Rajkumar R/o H.No. 38/2 Lal Bahadur Sadan New	DIW Sh		26 days	142	3758-00	सुनिता (33)
34	Sh Subhash S/o Sh Bhagwan R/o 38/2 Lal Bahadur Sadan New	DIW		26 days	142	3758-00	सुभाष चन्द्र (34)
35	Sh Sunny Kumar S/o Sh Rajkumar R/o B-21 Palika Dham New	DIW Sh		26 days	142	3758-00	सन्नी (35)
36	Sh Satish Pal S/o Sh Rajbir R/o 50 Block J-2 Madanpur Khadar	DIW		26 days	142	3758-00	(36)
	Daily Total			930 days	G. Total	1,34,421-00	
	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.

Sheet-5

HEALTH DEPARTMENT

MUSTER ROLL NO. 486 (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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
27	Sh Sermil Kumar S/o Sh Prem Pal R/o 6A Jamia Estate Jasola Behind Basant Vihar Delhi	DLW		26 day	142+ CA 66/-	3758.00	(27)
28	Sh Mahesh Chand S/o Sh Prem Chand R/o F-171 Budh Nagar Indra Puri Delhi	DLW		26 day	do	3758.00	(28)
29	Sh Yogesh S/o Sh Charan Lal R/o LIG-21/1247 Rechal Nagar Jhilmil Industrial Area	DLW		26 day	do	3758.00	(29)
30	Sh Anil Kumar S/o Sh Suman Pal R/o 167 JJ Colony Block A Sadar Pur Delhi	DLW		26 day	do	3758.00	(30)
31	Sh Pardeep S/o Sh Virender R/o 3017 Gali No 3 Dharam Pura Kailash Nagar Delhi	DLW		26 day	do	3758.00	(31)
			Daily Total	800 day	Total	115,631-00	
			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

HEALTH DEPARTMENT

Sheet-4.

MUSTER ROLL NO. 486 (From 1/3/09 To 31/03/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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 Payable Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
22	Smt Sujata Chandeliya W/o Sh Satbir Chandeliya R/o 177/5 East Kidwai Nagar	DWK	S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S	26 day	142 P CA 66/2	3758.00 Rs 78051-00	Sujata Paid (22)
23	Sh Vinay Kumar S/o Sh Vimal Kr Car R/o 174 Block E Moti Bagh E New Delhi	DWK	S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S	26 day	→	3758.00	Paid Vinay (23)
24	Sh Kishan Chand S/o Sh Sultan Singh Car R/o 105-170/5 Jhareda Village Moti Nagar New Delhi	DWK	S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S	26 day	→	3758.00	Paid Ram 21-7-09 (24)
25	Sh Arun Kumar S/o Sh Om Prakash Car R/o 5/34 Trilokpuri Delhi	DWK	S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S	26 day	→	3758.00	Paid Arun (25)
26	Sh Rakesh S/o Sh Prem Pal R/o 6A Janta Flats Basant Enclave Basant Vihar New Delhi	DWK	S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S S	26 day	→	3758.00	Paid Rakesh (26)
	Daily Total		25 26 25 24 25 25 26 25 26 26 26 26 25 26 25 25 25 25 25 26 25 25 26 26 25 26 26	670 day	G. Total	96841.00	
	Initials of person marking the daily attendance		S M M M M L S M M L M M S M M L M S M M M M S M M				
	Initials of Inspecting Officer		✓ ✓ ✓ ✓ ✓ ✓				

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

	Rs.	P.
Grand Total of this Muster Roll		

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

HEALTH DEPARTMENT

Sheet 3

MUSTER ROLL NO. 486. (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473.

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
16	Sh Manish S/o Kanwar Sain Rajender Pl. 16/248 Indra Puri New	D/W Sh		26 dy	142 4A 60/2	3758 00	Manish (16)
17	Sh Rajesh S/o Sh Ram Bharosi Pl. 17/181 Nand Ch Bapu Nagar	D/W Sh		26 dy	-do-	3758 00	(17)
18	Sh Manoj S/o Sh Om Parkash Pl. Sh Prem Nath opposite Hotel Cooperative Mugg Wala	D/W Sh		26 dy	-do-	3758 00	(18)
19	Sh Vinod S/o Sh Suresh Pl. T.L Kalsi Park New	D/W Sh		26 dy	-do-	3758 00	(19)
20	Sh Ravi Kumar S/o Sh Balkishan Pl. A-243 Janta Quarter Tilak Nagar New Delhi	D/W Sh		26 dy	-do-	3758 00	(20)
21	Sh Arun Kumar S/o Sh Om Prakash Pl. 18th Block 12 Netaji Nagar Sector 34 New Delhi	D/W Sh		26 dy	-do-	3758 00	(21)
		Daily Total		540 dy	G. Total	75,051-00	
		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.

Sheet-2.

HEALTH DEPARTMENT

MUSTER ROLL NO. 486. (From 01/3/09. To 31/03/09.)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473.

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

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

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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
10	Smt Pushpa W/o Sh Kishan R/o 13 Babu Jyoti Ram Pharmacy Sewak Park 7 Hats Bhagwan Park	DW Sh	S							S							S							S							S			26 dy	142+ CD 66½	3758.00	Paid पुष्पा (10)
11	Sh Shammi S/o Sh Purom Singh R/o 274-75 Block K Lakshmi Park New Delhi	DW Sh	S							S							S							S							S			26 dy	do	3758.00	Paid (11)
12	Sh Sunil Kumar S/o Sh Sultan R/o B-21 Patila Phase II Mandi	DW Sh	S							S							S							S							S			26 dy	do	3758.00	Paid Sunil (12)
13	Sh Rakesh S/o Sh Bishan Chand R/o 164 Nome Palat Balmiki Sadan Mandir Marg	DW Sh	S							S							S							S							S			26 dy	do	3758.00	Paid 21/4/09 (13)
14	Sh Arvind Kumar S/o Sh Barbhan Dass R/o S-354 Block B. Cantt Nagar Jawala Puri Delhi	DW Sh	S							S							S							S							S			26 dy	do	3758.00	Paid (14)
15	Sh Subhash S/o Sh Hari Chand R/o D-6 Bangla Sahib Rd New Delhi	DW Sh	S							S							S							S							S			26 dy	do	3758.00	Paid (15)
	Daily Total		S	12	14	13	14	14	15	S	15	14	14	15	15	14	S	15	14	14	15	14	14	S	14	15	14	15	15	15	S	15	15	384 dy	G. Total	55,503.00	
	Initials of person marking the daily attendance		S							S							S							S							S						
	Initials of Inspecting Officer		S							S							S							S							S						

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

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

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

Rs.	P.

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

Sheet-1

HEALTH DEPARTMENT

MUSTER ROLL NO. 486 (From 1/3/09 To 31/3/09)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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
6	Sh. Sachin S/o Vijay, Mandir Marg H. Basti New Delhi-01	Daily Wager Sfk.	S P P H A P P P S P P 4/P P P P S P P P P P P S P P P P P P S P P	24 days	@ 142.64	3469 00	(6) सचिन
7	Ravinder Kumar S/o Ganga Ram. Add:- Bapu Dham NDMC Qt New Delhi	-do-	S P P P P P P S P P 4/P P P P S P P P P P P S P P P P P P S P P	26 days	@ 142.64	3758 00	(7) LTI all-rm
8	Smt Chander Wali w/o Rakesh. Add:- Kalyan Puri Block 22 New Delhi	-do-	S P P P P P P P S P P 4/P P P P S P P P P P P S P P P P P P S P P	26 days	-do-	3758 00	(8)
9.	Smt Babli w/o Rajinder Kumar Add:- 213, A Block Laxmi Nagar Delhi	-do-	S P P P P P P S P P 4/P P P P S P P P P P P S P P P P P P S P P	26 days	-do-	3758 00	9/4/09 (9)
		-do-					
	Daily Total		2 6 8 7 8 8 9 2 9 9 8 9 9 8 2 9 9 8 9 9 8 8 1 8 9 8 9 9 9 1 9 9	228 days	G. Total	32955 00	
	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

O.O. No :- D/83/CMO/HQ Dt 18/2/09.

HEALTH DEPARTMENT

(51) daily wayes

Sheet-I

142+CA Daily

MUSTER ROLL NO. 486 From 1/3/09 To 31/3/09 (1+9) Total Sheet = 10

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 473

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 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	Ravi Kumar S/o Kalu Ram A.No:- Palika Dham NDMC Qt New Delhi	Daily wager S/K.	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 S P P P	26 day	@ 142+CA	3758.00	(1) Ctl attest
2	Vatan S/o Rai Pal Aligani NDMC Qt. New Delhi	-do-	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 S P P P	26 day	@ 142+CA	3758	(2) Ctl attest
3	Amit S/o Om Parkash. B-806, Budh Nagar Greater Noida Delhi	DW -do- HD	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 S P P P	26 day	@ 142+CA	3758.00	(3) Amit
4	Rahul S/o Rohtash. R/o-10241, Block-10-A Karol Bagh Faiz Road New Delhi	DW -do-	P P P P R A A P P P P P A P P P P P P R P S A P P P P P S P P P	22 day	@ 142+CA	3180.00	(4)
5	Prem Parkash S/o Harish Chand. R/o-6/299, Durga Mohalla Shadra Delhi	-do-	P P P P R P P P P P P P P P P P R P P P P P P P P P P P R P P P	26 day	@ 142+CA	3758.00	(5)
	Daily Total		2 5 5 3 4 4 5 2 5 5 4 2 5 5 4 5 5 4 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5				
	Initials of person marking the daily attendance			26 day	G. Total	18,212-00	
	Initials of Inspecting Officer						

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

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

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

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

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.