Sheet-4.

HEALTH DEPARTMENT

MUSTER ROLL NO. 579 (From 1/5/09 To 17/05/09)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 539 73/H 12/6/09

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
21	Sh. SANJOO S/o Sh. RAMPRASHAD A-183, Tigri JJ Colony. N. Delhi	Sly		13 days		1996=00	Paid
22	Sh. VINOD KR S/o Sh. SAKHBIR Singh, 17, Balmiki Sadan Mandir Marg Delhi	"		11		1689=00	Paid
23	Sh. NARESH KR S/o Sh. BALBIR SINGH " 16/ Balmiki Sadan Mandir Marg Delhi.	"		13		1996=00	Paid
24	Smt VEENA W/o Sh CHANDKUMAR 93, Balmiki Sadan mandir Marg Delhi-01.	"		14		2149=00	Paid
25	Smt SMRITA W/o Sh VINOD KR A-9, Lodhi Colony. Delhi	"		14		2149=00	Paid
26	Sh. SURENDER KR S/o Sh. RAGHUBIR SINGH " F-41, Munirawar Park. Shahdara Delhi	"		14		2149=00	Paid
			Daily Total	354=00	G. Total		
			Initials of person marking the daily attendance			54342=00	
			Initials of Inspecting Officer				

Pay Rs. 54342=00 (Rupees Fifty four thousand Three hundred forty two only)

S. No. 1 to 26. All. RTI. LT. 1 & Sing. Attested

Fully Paid Bill

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

M.O.H. Sr. A.O

CANCELLED

Date.....

Released for 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

Sheet-3

HEALTH DEPARTMENT

MUSTER ROLL NO. 579. (From 1/5/09. To 17/05/09.)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 539.

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 15, 2 14, 3, 4 15, 5 13, 6 14, 7 15, 8 15, 9 15, 10, 11 15, 12 15, 13 15, 14 15, 15 15, 16 15, 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. AMIT KR. S/o Sh. AMAR SINGH 2245, Type II Gali Radhi Road. Delhi	Sw	P P S P P P P P S P P P A P P S	13 days		1996=00	Paid
17	Sh. SUNNY S/o Sh. RAMESH CHAND F-45, Balmiki Sadan Mandir marg Delhi.	"	P P S P P P P P S P P P P P P S	14		2149=00	Paid
18	Sh. RAJESH S/o Sh. OMPRAKASH 33, Balmiki Sadan Mandir marg.	"	P P S P P P P P S P P P P P P S	14		2149=00	Paid
19	Sh. Summit S/o Sh. JAI PRAKASH 15/D/5, Prithvi Raj Lane. N. Delhi	"	P P S P P P P P S P P P P P P S	14		2149=00	Paid
20	Sh. NANAK CHAND S/o Sh. HARCHAND G/4 Palika Shopping Flats Rohini Sham - Delhi	"	P P S P P P P P S P P P P P P S	14		2149=00	Paid
	Daily Total		20 19 S 20 18 19 20 20 20 S 20 20 20 19 20 20 S		G. Total		
	Initials of person marking the daily attendance		S S			42214=00	
	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.

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 579. (From 1/5/09 To 17/05/09.)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 539.

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 ... (1/10 – 17/10)	Total	Rate Rs. P.	Amount Rs. P. (21030)	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
11	Sh. MANOJ KR. S/o Sh. KUMESH KR. 107, Balmiki Sadan Mandir Marg. Delhi	S/w	P P S P P P P P P S P P P P P P / C C C C C C C C C S C C C C C C S	14 days		2149/-	Paid Amt
12	Sh. SUNIL KR. S/o Sh. MADAN LAL 848, H.S. Road. Bara Nagar Delhi	"	P P S P P P P P P S P P P P P P / P P P P P P P P P P P P P P P S	14		2149/-	Paid Amt
13	Sh. PRADEEP S/o Sh. SUMER SINGH 315, Shah Pur Jatt Delhi	"	P P P P 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 P P	14		2149/-	Paid Amt
14	Sh. AKASH S/o Sh. JAI KISHAN 5, Mansar Bhawan. ITO. Delhi	"	P P P P 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 P P	14		2149/-	Paid Amt
15	Sh. AMIT KUMAR S/o Sh. VINOD KR. 2/603, Block A12. Resettlement Colony Bhalswa Delhi	"	P P S P 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 P	13		1996/-	Paid Amt
	Daily Total		15 14 S 15 13 14 15 15 15 S 15 15 15 15 15 15 S	206 days	G. Total	31622/-	
	Initials of person marking the daily attendance		S				
	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 payment paid (in words) Rupees ..... Balance Paid

Rs.	P.

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 579 (From 1/5/09 To 17/5/09)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 539

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 ... (1–31)	Total 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
06	Smt SAROJ w/o Sh PREM D-15, Palika Dham Delhi -	D/o SK	P P P P P P P P P S P P P P P P S	14 days		2149=00	RTI Affd Recd
07	Smt ASHA w/o Sh DEEPAK KR 35/356, Trilok Puri Delhi-91.	"	P P P P P P P P P S P P P P P P S	14		2149=00	Paid
VIMLA 08	Smt Vimla w/o Sh RAMESH D-213, Dashrath Puri Nayeer pur Delhi —	"	P P P P P P P P P S P P P P P P S	13		1996=00	Paid
09	Smt MADHU w/o Sh Jaipal F-585, Raghubir Nagar Rajori Garden Delhi	"	P P P P P P P P P S P P P P P P S	14		2149=00	Paid
10.	Sh SANJAY S/o Sh BABULAL 22, Balmiki Sadan mandir marg. New Delhi-	"	P P P P P P P P P S P P P P P P S	12		1842=00	Paid
	Daily Total		10 10 S 10 8 9 10 10 10 S 10 10 10 10 10 10 S	87 days	G. Total		
	Initials of person marking the daily attendance		✓ ✓ S ✓ ✓ ✓ ✓ ✓ ✓ S ✓ ✓ ✓ ✓ ✓ ✓ S			21030=00	
	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

Rs.	P.

O-O-No! - D/83/CMO/HQ Dt 18/02/09.

(26) daily wages 8hr, 4/8 @ 142 e CA.

(174) Total Sheet = 5

HEALTH DEPARTMENT

MUSTER ROLL NO. 579. (From 1/5/09 To 17/05/09)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 539.

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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
01	Smt Nirmala w/o Sh. Jagish Dhoge 1959, Village - Billanji Kotla mubarak Pur. Delhi - 03.		P P S P P P H P P S P P P P P S	14 days		2149=00	Paid
02	Smt Urmila w/o SRICHAND A-184, J.J. colony wazirpur Delhi.	"	P P S P P P P P P S P P P P P S	14		2149=00	RTI Attested Paid
03	Sh. Krishan S/o Sh. SHANKER F-43, Balmiki Gadem Mendis Marg. Delhi-01	"	P P S P P P P P P S P P P P P S	14		2149=00	Paid
04	Smt SANTOSH w/o Sh. MUKESH 1570 Inder Basti Kotla Mubarak Pur N. Delhi 110003	"	P P S P P P P P P S P P P P P S	14		2149=00	Paid
05	Sh AKASH S/o Sh BRIJPAL 38, Mandawali, Fazalpur Delhi-92.	"	P P S P P P P P P S P P P P P S	14		2149=00	Paid
	Daily Total		5 5 S 5 5 5 5 5 5 S 5 5 5 5 5 5 S	Today	G. Total		
	Initials of person marking the daily attendance		W S W W W W W S W W W W W S			10745=00	
	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.