Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 590 (From 1/5/09 To 31/5/09)

Circle No. I Voucher No. 90/H Dated

In continuation of Muster Roll No. 550 dated 3/6/09

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
(11)	Smt. Renkesh Ramesh- H/o- C-460 Vasant Kun.		P P S P P P H P P S P P P P P S P P P P P S P P P P P S	26 days.		3990	21/6/09
(12)	Smt. Mayank Rajesh Kr. H/o- B-110 Sangam Vihar.		P P S P P P H P P S P P P P P S P P P P P S P P P P P S	25 days.		3838=00	21/6/09
(13)	Sh. Sitak Ram S/o Balbir Sin. H/o -372 Gandhi Nagar-		P P S A P P H P P S P A P P P S P A P P P S P P P P P S	23		3531	21/6/09
(14)	Sh. Rachpal S/o Dalbag- H/o- T- 615 Gali No-21 Bed Jeet Nagar-		A A A A A A H A A A A A A A A A A A A A A A A A A A A S	19 days		2610	21/6/09
		Daily Total		343	G. Total	52706	52816=00
		Initials of person marking the daily attendance		343 days			
		Initials of Inspecting Officer					

Pay Rs. 52816=00 (Rupees Fifty two thousand eight hundred Sixteen Only)

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.

M.O.H. Sr. A.O.

CANCELLED 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

Rs. P.

Leave Vr. 5/6/09 Entry in page No 49 Serial No 1366

Acctt SE(HG)

PAY, CASH, CHEQUE PAYMENT

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 590 (From 1/5/09. To 31/5/09.)

Circle No. I. Voucher No. ..... Dated .....

In continuation of Muster Roll No. 550

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)	Rajesh Kr S/o Ram Asrey Ward- PO D- 4/48 Babubdeen M.D-	D/o-	P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P	26 days		3992	
(7)	Sh. Ranbir Singh S/o Babu Ram PO D- G. F/o Bahadur Nagar	-do-	P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P	24 days 24 days		3685-	
(8)	Smt. Kamlesh D/o Bhola Ram PO D- 94- B Yusuf Sarai	-do-	P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P	26 days.		3992	
(9)	Smt. Geeta W/o Ramphal PO D- B. Block - Holambi Kalan	-do-	P P P P P P P P P P P P P P P P P P P P P P P P P	25 days		3838	
(10)	Sh. Sandeep S/o Balram Ruj PO D- D-255 Gali No-5	-do-	P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P	26 days		3992	
	Daily Total			252	G. Total	38758	
	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.

O.O. No:- D/118/CMO/HQ Dt. 4/3/09.

(14) daily wages S/K, L/B @ 142 + CA.

(142) total sheet = 3.

HEALTH DEPARTMENT

MUSTER ROLL NO. 590 (From 1/5/09 To 31/5/09)

Circle No. I Voucher No. ..... Dated .....

In continuation of Muster Roll No. 550

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
1	Sri. Neeraj S/O Pittoo ADD - P-IV	D/W -	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	A	A	P P	P P	S	P P	A	A	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	22 days		3378	नीरज
2	Smt. Anny W/O Jeetu ADD - 153 P.K. Road	- do -	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	26		3992-00	अन्नी
3	Smt. Sunita W/O Shishpal ADD - 30 Jan Road		P P	P P	S	P P	P P	P P	H	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	26 days		3992-00	सुनीता
4	Smt. Anita W/O Vijay ADD - 4-10 Ashoka Church M.A		P P	P P	S	P P	P P	P P	H	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	26		3992-00	अनीता
5	Sri. Ajay K/S/O Ramkishan ADD - 6/234 Daxinpuri		P P	P P	S	P P	P P	P P	H	P P	P P	P P	P P	P P	P P	P P	P P	P P	S	P P	A	P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	25 days 26		3838	3992-00
	Daily Total																																	125	G. Total	19192	19346-00
	Initials of person marking the daily attendance		H	H	S	H	H	H	H	H	S	H	H	H	H	H	H	H	S	H	H	H	H	H	H	S	H	H	H	H	H	H	S				
	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.