

70690

**Contingent Bill Number :** 30307091000053

**Disbursement Type:** Cash **Bill Type:** ImprestBills  
**Fund:** NDMC Municipal General Fund **Bill Date:** 07-Jul-2009  
**Segment:** GENERAL FUND **Sub Segment:** CASH IN HAND  
**Field:** PUBLIC HEALTH ACCOUNTS BRANCH **Sub Field:** (PUBLIC HEALTH) ANTI MALARIA SURV  
**Functionary:** DIRECTOR (PH) **Payable To:** Secretary,NDMC  
**Sanction By:** Chairman **Sanctioned On:** 15-May-2009

**SanctionDetails:** Office Order No. D-1295/CMO(MAL) dated: 28.05.09 vide approval of Chairman dated: 15.05.09

**Narration:** Payment 10 daily wagers A.M.G(M) in circle No. -05 w.e.f. 01.06.09 to 30.06.09 @Rs151+CA per day

**Bill Status:** CREATED

*69/H  
8/7/09*

**Remarks:**

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202011	STG.OF ANTI MALARIA OPERATION	37770
<b>Gross Amount</b>					37770

**Deductions:**

Code	Payable To	Function	Account Code	Account Head	Amount
<b>Total Deduction</b>					0
<b>Net Amount</b>					37770

Net Payable in Words :

<b>Created By</b>	neelam.uniyal	<b>Verified By</b>	
<b>Confirmed By</b>		<b>Approved By</b>	
<b>Final Approved By</b>			

*Not approved  
08/07/09*

# HEALTH DEPARTMENT

**MUSTER ROLL NO. 674**

From 1/6/09 To 30/6/09

Sheet-II

Circle No. Mel (5) Voucher No. 674 Dated 30/6/09  
 In continuation of Muster Roll No. 674

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	
			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					
10-	<u>Anand Kumar So</u> <u>St. Om Prakash</u> <u>No-1-89, Dakshinpur</u> <u>New Delhi</u>																																					
<b>VERI-FIED PAYMENT</b>		Head Cashier																																				
		Daily Total																																				
		Initials of person marking the daily attendance																																				
		Initials of Inspecting Officer																																				

Pay Rs. 37,770-00  
 Accountant (HG) [Signature]  
 M.O.H. [Signature]  
 Sr. A.O. [Signature]

Total of this Muster Roll ...  
 Payment made, as per details transferred to Register of Unpaid Wages Rs. 11-115  
 Balance Paid

69/17  
 8-7/10  
 Received by ...  
 Total of this Muster Roll ...

Rs. P.  
 G. Total 37,770-00

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 674

674

1/6/09

To 30/6/09

Circle No. 5 (Med) Voucher No. 613/A  
In continuation of Muster Roll No. ....

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																															Total Rs.	Rate Rs.	Amount Rs.	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									
66	161m4 gunic stoppi din the		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	P	P	P	P	P	P	P		
50	5089 din the gunic musst gust dany-alway gupairgo		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	P	P	P	P	P	P	P		
9-	21374 stoppi guun the 19/275 gunic-alway		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	P	P	P	P	P	P			
8-	19101 stoppi din the G-33 dany gunic		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	P	P	P	P	P	P			
97	gunic gunic din the G-I din the gunic din the		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	P	P	P	P	P	P			
	Daily Total		4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
	Initials of person marking the daily attendance																																									
	Initials of Inspecting Officer																																									

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

Grand Total of this Muster Roll ... ..

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

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

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

Rs. P.

D.O. No. 1 - D/1995/CMO/Med dt 28/5/05.

# HEALTH DEPARTMENT

15 Clerk's copy A.M.C. C/15/PCA.

142 = 3 Sheets

## MUSTER ROLL NO.

694

(From 1/6/05

To 30/6/05

Circle No. .... 5 (Med) Voucher No. .... 613/A

Dated .....

In continuation of Muster Roll No. ....

### 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 .....																															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				
✓ 1	918/91 S/o of Mr. Singh 12-15/16 3rd Main Amritsar Road - 41		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	P	P	✓	
✓ 2	Talwar S/o of Mr. Singh 57 Dhillon Road Amritsar - 140001		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	P	P	✓	
✓ 3	Bhain S/o of Mr. Singh 186 Dhillon Road Amritsar - 140001		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	P	✓		
✓ 4	Sharma S/o of Mr. Singh C.W.E. Station Road Amritsar - 140001		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	P	✓		
✓ 5	Sharma S/o of Mr. Singh 81 Dhillon Road Amritsar - 140001		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	P	✓		
Daily Total			5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	130		
Initials of person marking the daily attendance			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		
Initials of Inspecting Officer																																					
Pay Rs. .... (Rupees)																																					

Accountant (HG) M.O.H. Sr. A.O.  
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Grand Total of this Muster Roll ...  
Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Rs. P.

Balance Paid