Contingent Bill Number : 30307091000052

Disbursement Type: Cash
Bill Type: ImprestBills
Fund: NDMC Municipal General Fund
Bill Date: 06-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
Bill Status: CREATED
Narration: Payment 15 daily wagers A.M.G(M) in circle No. -07 & 08 w.e.f. 01.06.09 to 30.06.09 @Rs151+CA per day
Remarks:

68/17
8/7/09

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202011	STG.OF ANTI MALARIA OPERATION	59112
			Gross Amount		59112

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		59112

Net Payable in Words :

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

Not approve
08/07/09

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 676 (From 1/6/09 To 30/6/09)

Circle No. 7 & 8 (Mal) Voucher No. ..... Dated .....

In continuation of Muster Roll No. 613/A

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
																																		255 days	154=00	Rs 39152=00	
11.	सुबेदार S/o श्री. राम निवास सिंह B20/1 रेलवे कालोनी सेवा नगर नई दिल्ली-110003	AMG TMR	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	S	P	P	P	26 days		3992=00 Paid	सुबेदार N.S 9-7
12.	रविन्द्र S/o श्री जयपाल सिंह A-132 ज्वाला पुरी कैम्प न.4 नांगलोई नई दिल्ली-87	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	Ravinder Kumar N.S 9-7
13.	राज कुमार S/o श्री. शोभाराम J-123 दीपा पुरी नई दिल्ली-62	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	Raj Kumar N.S 9-7
68/H 8/7/09	14. अम्बिका S/o श्री. राजनाथ सिंह F-9, बी.के दत्त कालोनी नई दिल्ली-03	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	Ambika M.S 9-7
	सुनील S/o श्री बरसाती लाल B-521 मोहन नगर, शादीपुर डिपो नई दिल्ली 110008		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	S	P	P	—	26 days	"	3992=00 Paid	Sunil M.S 9-7
		Daily Total	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	—	385 day	G. Total	59112=00	
		Initials of person marking the daily attendance	JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN					
		Initials of Inspecting Officer																																			

Net Payable Rs 59,112-00

VERIFIED FOR CASH/PAYMENT Cashier

Pay Rs. 59,112-00 (Rupees Fifty nine thousand one hundred twelve only)

Fully paid

Accountant (HG) AAO (H) AO (H) 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.

CANCELLED

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

Received on 3/7/09 Entry No page 5 Serial No 1412

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 676 (From 1/6/09 To 30/6/09)

Circle No. 788 (Mal) Voucher No. ..... Dated .....

In continuation of Muster Roll No. 613/A

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
6.	सुनिल S/o श्री. राजेन्द्र म.नं. - 39 जी पोइन्ट काली बाड़ी लेन गोला डाकखाना नई दिल्ली - 01	AMG TMR	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	S	P	P	—	26 days	6/F 130 Days 154=00	Rs 19960-00 Paid 3992=00 Paid	
7.	अशोक वर्धन S/o श्री. सुरेश कु. F-1/11 दक्षिण पुरी नई दिल्ली - 62	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	
8.	दीपक कुमार S/o श्री. दयाराम म.नं.:- M-87 सफूरपुर जे.जे. कालोनी नई दिल्ली - 34	AMG TMR	P	P	A	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	A	A	S	A	A	21 days	"	3224=00 Paid	
9.	गोपाल S/o श्री. पूरन Q-11 श्री निवास पुरी प्राइवेट कालोनी नई दिल्ली - 65	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	
10.	मुकेश S/o श्री ~~[illegible]~~ पाल ~~[illegible]~~ म.नं. 9-16 पृथ्वी राज लेन खान मार्किट नई दिल्ली - 3	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	
	Daily Total		5	5	4	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	4	4	S	4	4	—	255 days	G. Total	Rs 39152-00	
	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 ... ... Rs. P.

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

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

Fully Paid and All Sign. Attested

O.O. No :- D/1295/CMO/Mal dt 28/5/09.

(76) Clerk Dayal A.M.G @ 151+C4.

(1+2) = 3 Sheet.

HEALTH DEPARTMENT

MUSTER ROLL NO. 676 (From 1/6/09 To 30/6/09)

Circle No. 7+8 (Mal) Voucher No. ..... Dated .....

In continuation of Muster Roll No. 613/A

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
1.	सन्तराम S/o श्री साहबदीन म.नं.:- C.R-205 लालता पार्क लक्ष्मी नगर नई दिल्ली-92	AMG TMR	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	S	P	P	—	26 days	154=00	3992=00 Paid	Santram N.S. 9-7
2.	सुनिल कुमार S/o श्री. माली-चरण म.नं.:- A-56 ज्वाहर पार्क देवली रोड़ नई दिल्ली-62	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	सुनील कुमार N.S. 9-7
3.	गजेन्द्र पाल S/o श्री. नौबत सिंह B-1159 संगम विहार नई दिल्ली-62	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	गजेन्द्र पाल N.S. 9-7
4.	राजीव S/o श्री. जय पाल 19/275 बापू धाम-चाणक्यापुरी नई दिल्ली-21	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	राजीव N.S. 9-7
5.	राजेन्द्र प्रसाद S/o श्री रामनाथ म.नं. 1884 लक्ष्मीबाई नगर नई दिल्ली-23	AMG TMR	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	S	P	P	—	26 days	"	3992=00 Paid	राजेन्द्र प्रसाद N.S. 9-7
	Daily Total		5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	5	5	5	S	5	5	5	130 days	G. Total	Rs 19960-00	
	Initials of person marking the daily attendance		JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN	JN	JN	JN	JN		JN	JN	JN				
	Initials of Inspecting Officer					CH							CH							CH							CH										

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.

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