84/II
12/08/09

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 692. (From 1/7/09. To 31/7/09.)

Circle No. I Voucher No. Dated.

In continuation of Muster Roll No. 657

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
(7)	Sri. Mahender S/o Ramji Ram H.No- 5-48 Mandir Marg		P P A P P A P P P P P A A P P P P P A P P P P P A P P P P P A	20 days	151-66 + HRA	3069-00	
(8)	Sri. Mahender S/o Ramka- H.No- 16/235 Jhilmil Ext. Delhi-91		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	do-	3989-00	
(9)	Smt. Sapan S/o Rajesh Kr. H.No. 186 Harijan Basti Timarpur		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	27 days	do-	4143-00	
(10)	Smt. Rashi Pateja W/o Sunil Kr. H.No- 20/1C Type I Qtrs Dr. Area		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	27 days	do-	4143	
(11)	Smt. Geeta W/o Lalit Kr. H.No. P-41 Man Sarovar Park M.		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	27 days	do-	4143	
			Daily Total 11 10 10 10 S 11 11 11 10 11 10 S 10 11 11 10 11 11 S 11 11 11 11 G 11 S 11 11 10 10 11	283 Days 273	G. Total	43,424-00	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

VERIFIED FOR CASH/CHEQUE PAYMENT
Head Cashier

Net Payable Rs. 43,424-00

Received 4/8/09 Entry No. Page No. 53 Serial No. 4/8/09 1467

Pay Rs. 43,424-00 (Rupees Forty three thousand four hundred twenty four 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.

CERTIFIED
A.O.(PH)

M.O.H. Sr. A.O

Grand Total of this Muster Roll ... ... Rs. 43,424-00 P.

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

Rs. P.

Fully Paid S. No-1 to 11, K.T. Jain
Signs attached

D.O. NO:- D/203/CMO/HQ Dt. 18/5/09.

(11) Clerk wages Sik. 4/B @ 151+CA (1+1) = 2 Sheet.

HEALTH DEPARTMENT

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In continuation of Muster Roll No. 657

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

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(1)	Sh. Pradeep S/o Ram- DO C-22 Police Ram Colonies	Manager	P A A P P P