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Conf**Contingent Bill Number :** 30308091000038**Disbursement Type:** Cash**Bill Type:** ImprestBills**Fund:** NDMC Municipal General Fund**Bill Date:** 07-Aug-2009**Segment:** GENERAL FUND**Sub Segment:** CASH IN HAND**Field:** PUBLIC HEALTH ACCOUNTS BRANCH**Sub Field:** (PUBLIC HEALTH) SANITATION CIRCLE**Functionary:** DIRECTOR (PH)**Payable To:** Secretary, NDMC**Sanction By:** Director(P)**Sanctioned On:** 01-Jul-2002**SanctionDetails:**

Office Order No. D-1234/SO(HE-III)/GC-III dated: 01.07.2002 vide approval of Director(P)

**Bill Status:** CREATED**Narration:** Payment to 3 RMR Safai Karamcharis in Circle No. 03 w.e.f. 01.07.09 to 31.07.09**Remarks:**69/H  
12/8/09

| Code                | Payable To | Function      | Account Code | Account Head              | Amount |
|---------------------|------------|---------------|--------------|---------------------------|--------|
|                     |            | Public Health | 2308003      | GARBAGE REMOVAL CLEARANCE | 3132   |
| <b>Gross Amount</b> |            |               |              |                           | 3132   |

**Deductions:**

| Code                   | Payable To | Function | Account Code | Account Head | Amount |
|------------------------|------------|----------|--------------|--------------|--------|
|                        |            |          |              |              |        |
| <b>Total Deduction</b> |            |          |              |              | 0      |
| <b>Net Amount</b>      |            |          |              |              | 3132   |

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> |               |                    |  |

0.0 No 1934/SOHE-II/C-III / Dated - 17-02

# HEALTH DEPARTMENT

0.0 No 1934/SOHE-II/C-III / Dated - 1-7-02 Total.

## MUSTER ROLL NO.

R.M.R. - 7 (From 1-7-09 To 31-7-09) S.K. C.N. III

Circle No. III Voucher No. R.M.R. - 7 Dated 6/18/09

### PART-NOMINAL-ROLL

| S.No. | Name, Father's/Husband's Name & Address<br>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 |             | Rs.  | P. | Rs.    | P.      |   |     |                    |                    |  |
| 1     | Sh. Rajesh S/o Babjer<br>R.M.R. S.K. C.N. III 30 N/1234<br>SOHE II / CRE II Dated - 1-7-02<br>Mangal Puzari Dehm | R.M.R. S.K.               | 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      | 07 days | 1912A<br>62   |     | 1074=00-45=1029=00 |                    |  |
| 2     | Sh. Neeraj S/o<br>Rajendrar<br>R.M.R. S.K. C.N. III 30 N/1234<br>SOHE II / CRE II Dated - 1-7-02                 | - 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  | P           | P    | P  | P      | P       | 14 days   | "   |                    | 2148=00-45=2103=00 |  |
| 3     | Sh. Raju S/o Mohan Lal<br>S.K. C.N. III 30 N/1234<br>SOHE II / CRE II Dated - 1-7-02<br>Mangal Puzari Dehm       | - do -                    | A   | A | A | A | A | A | A | A | A | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A  | A           | A    | A  | A      | A       | Nil   | Nil |                    | Nil                |  |
|       | Gross Amt Rs 3322-00<br>BIF Rs 90-00<br>Net Payable Rs 3132-00   | VERIFIED FOR CASH/PAYMENT | Initials of person marking the daily attendance |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | Daily Total | Rs.  | P. | Rs.    | P.      | Initials of Inspecting Officer  |     |                    |                    |  |

Accountant (HG), CHIEF MEDICAL OFFICER

Pay Rs. 3132-00 (Rupees) Three thousand one hundred thirty two only

Grand Total of this Muster Roll ...  
Deduct Payment made, as per details transferred to Register of Unpaid Wages 211809

Sr. A.O

M.O.H. Signatures and stamps of various officials.

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.