NEW DELHI MUNICIPAL COUNCIL

Payer's Copy

SR. NO. D

RECEIPT

46298

Receipt No.: CH091010NDMC032298 **Date:** 07-Oct-2009

Challan Number: 189465 **Field:** PUBLIC HEALTH ACCOUNTS BRANCH

Sub-Field: (PUBLIC HEALTH) SANITATION CIRCLE 10 **Function:** Public Health

Functionary: DIRECTOR (PH) **Received From:** SH. S.K. CHOPRA(S.I), CIRCLE-10

On Account of: UNPAID SALARY OF SH. PAWAN S/O SH. MOHAN LAL DAILY WAGER S/K CIRCLE-10, VIDE VR. NO. 58/H DATED 11.09.09 FOR THE MONTH OF AUGUST-2009.

Address: SH. S.K. CHOPRA(S.I), CIRCLE-10.

Account Code	Description	Amount
2308003	GARBAGE REMOVAL CLEARANCE	154

Payment Mode: Cash **Total Amount:** 154

Total Amount in Words: One Hundred And Fifty Four Rupees Only

Cheque/DD No.: **Cheque/DD Date:** **Bank:**

Name of the Operator: naresh.kumar **Counter No:** 1

NDMC

नई दिल्ली नगर पालिका परिषद्

Signature of Authorised Officer

RECEIPT IS SUBJECT TO REALISATION OF CHEQUE/DRAFT/PAY ORDER.

HEALTH DEPARTMENT

Sheet-8.

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. 58/H Dated

In continuation of Muster Roll No. Fresh 11/9/09

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
41.	Sushil S/o Sh. Devi Sahay 99 N.D.M.C Flat Belmikki Sadan Mandir marg	D/W	18 19 20 21 22 23 24 25 26 27 28 29 30 31 — P P P P S P / P P P P S P / P P P P P	5 Days	153 PCA	768-00	Attested
42.	Mahesh S/o Sh. Maharveer 208A/2 Savitri nagar Delhi	D/W	18 19 20 21 22 23 24 25 26 27 28 29 30 31 — P P P S P / P P P S P / P P P P	4 Days	3-dec	614-00	Attested
43.	Anil S/o Sh. Chhote D-252 Dhakshin Puri New Delhi	D/W	18 19 20 21 22 23 24 25 26 27 28 29 30 31 — P P P S P / P P P S P / P P P P	04 day	4-dec	614-00	Attested
44.	Ramesh S/o Ram Parshad 140, Tilak vihar New Delhi	D/W	18 19 20 21 22 23 24 25 26 27 28 29 30 31 — S S HS S / P P P P S P / P P P P	5 Days	2-dec	768-00	Attested
	Net Payable Rs. 56,962-00	D/W					
	Daily Total		18 19 20 21 22 23 24 25 26 27 28 29 30 31 — 4 22 26 30 32 — 35 35 36 37 38 38 — 38	371 Days	G. Total	56962-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Pay Rs. 56,962-00 (Rupees Fifty six thousand nine hundred sixty two only.

All the Signatures, LTI & RFI from Sr. No. 01 to 44 except Sr. No. 35 of Sh. Kawan S/o Mohan Lal are duly attested

Grand Total of this Muster Roll ... Rs. 00 P.

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

& the salary of Sr. No. 35 has been deposited in Cash branch vide challan No. 189465 dt 06/10/09.

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

receipt No. CH091010 MDMC 03248 dt 07/10/09 fully paid

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.

Sanitation Officer | Chief Sanitation Inspector | Sanitation Inspector

CANCELLED

VERIFIED FOR CASH/CHEQUE PAYMENT

Attested Copies

Entry has been made on page 56 Sr. No. 1533

02/9/10

HEALTH DEPARTMENT

Sheet-7

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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 ... (1–31)	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
36.	Sanjay S/o Narak Chand A-20 Jagjeewan nagar Kaithwara New Usman Pur	D/W	18 19 20 21 22 23 24 25 26 27 28 29 30 31 P P P P S P P P A P S P P P P P P P P P P P P P P P P P P P P	321 Days	151 PCA	49284	Attested
				10 days		1535-00	
37.	Golu S/o Rang lal H/539 Indira Camp Tilak Puri Delhi	D/W	P P P P A S P P P P P P S P P P P P P P P P P P P P P P P P P P P	11 days	do	1689-00	Attested
38.	Pawan S/o Mohan lal 794, Samman Bazar Bhogal Delhi	D/W	P A A A A S A A A A A A A A P P	01 days	do	154-00	Attested
39.	Sagar S/o Sh. Mangal 207 N.D.M.C Flat Balmiki Sadan Mandir Marg N.D	D/W	P P P P P P P P P S P P P P P P	5 Days	do	768-00	Attested
40.	Rajesh S/o Sh. Suresh 100 Harijan Basti Mandir Marg N.D	D/W	P P P P P P P P P S P P P P P P	5 Days	do	768-00	Attested
	Daily Total		4 22 26 30 32 — 35 35 34 33 34 34 — 34	353 Days	G. Total	54198-00	
	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 ... ...

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

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

Rs.	P.

HEALTH DEPARTMENT

Sheet-6

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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 ... (1–31)	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
31	Sanjay S/o Mahbir 794, Samman Bazar Bhogal Delhi	D/W	P P P P P S P P P P P P S 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	12 days	151 P.C.A	1842	Attested
32.	Rajender S/o Jai Pal B/11/6 FAAF Complexe Mahi Pal Pur	D/W	P P P P S P P P P P P S P P P P P P P P P P P P P P P P P P P	9 days	do	1382	Attested
33.	Naresh S/o Randir 7/102 N.D.M.C Flat Babu Dharm N.D	D/W	P P P P S P P P P P P S 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	11 days	do	1689	Attested
34.	Mukesh S/o Ammi lal 71 – N.D.M.C Flat Balmiki Sadan Mandir Marg Delhi	D/W	P P P P P S P P P P P P S 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	11 days	do	1689	Attested
35.	Sunder lal S/o Bishan lal W2-191-B-1 Harijan Colony tilak Nagar	D/W	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 P P P P P P P P P P P P P P P	12 days	do	1842	Attested
	Daily Total		29 29 29 28 31 – 33 33 30 29 31 30 – 30	321 days	G. Total	4984	
	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.

Sheet-5

HEALTH DEPARTMENT

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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
26.	Sanjay S/o Sh. Jai Singh 408 Income tax colony Pitam Pura Delhi	D/W	P P S P P A A A A S A P P P P P P P	4 Days	15/14	614-00	Attested
27.	Arvind S/o Sh. Lal Chand 11/152 N.D.M.C Flat Babu Dham N.D	D/W	P S P P P P P P P P P P P P P P P P P S P	8 Days	der	1228-00	Attested
28.	Rohit S/o Sh Ramesh Chand 14/16 Dakshin Puri N.D	D/W	P P P P P P P P P P P P P P S P P P P P P S P	10 Days	der	1535-00	Attested
29.	Nitin S/o Sh. Rajesh 156 D/S Tagor Garden New Delhi	D/W	P P P P P P P P P P P P P P S P P P P P P S P	10 Days	der	1535-00	Attested
30.	Mukesh S/o Sh. Kartar Singh E-72 Nanhe Ram Park Matiyala New Delhi	D/W	P P P P P P P P P P P P P P S P P P P P P S A	9 Days	der	1382-00	Attested
	Daily Total		15 19 23 26 28 28 25 24 26 26 26	266 Days	G. Total	40840-00	
	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 ... ...

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

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

Rs.	P.

HEALTH DEPARTMENT

Sheet-4.

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. fresh.

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
			12 13 14 15 16 17 18 19	18 Days	15 PCA		
21.	Sanjay S/o Sh. Raghbir	D/W	P P P P S P P P P P S P P P P P P P P P P P P P	11 Days		1689-00	Attested
22.	Bobby S/o Sh. Des Raj H-288 J.J. camp Tigari Delhi	D/W	P P P P S P P P P P S P P P P P P P P P P P P P	11 Days -do-		1689-00	Attested
23.	Gagan S/o Sh. Mohan Lal H.N. 4072 Gali No 15 Ajit Nagar Gandhi Nagar Delhi	D/W	P P P P S P P P P P S P P P P P P P P P P P P P	11 Days -do-		1689-00	Attested
24.	Ajay S/o Sh. Lakhi Ram H-10 Ashoka Church Gole Market N.D	D/W	P P S P P A P P S P P P P P P P P P	8 Days -do-		1228-00	Attested
25.	Sagar S/o Sh. Surinder Prithvi Raj Lane Khan Market N.D	D/W	P P P P A A A A A S A P P P	13 Days -do-		461-00	Attested
	Daily Total		15 16 19 21 23 23 21 20 22 22 23	225 Days	G. Total	34546-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		8 8				

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.

Sanitation Officer Chief Sanitation Inspector Sanitation Inspector

HEALTH DEPARTMENT

Sheet 3.

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh

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
			18 19 20 21 22 23 24 25 26 27 28 29 30 31				
			18 19 20 21 22 23 24 25 26 27 28 29 30 31	137 Days	15+CA	2054-00	
16.	Ashu S/o Sh. Des Raj	D/W	P P P P S P P P P P P S 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	11 Days		1689-00	Ajay Singh Attested
17.	Ajay Singh S/o Rajinder Singh 176 A Dawlipi village New Delhi	D/W	P P P P S P P P P P P S 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	11 Days	-do-	1689-00	Rahul Attested
18.	Rahul S/o Sh. Mohan Lal H.N. 4072 Gali No-15 Asit Nagar Gandhi Nagar Delhi	D/W	P P P P S P P P P P P S 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	11 Days	-do-	1689-00	Sandeep Attested
19.	Sandeep S/o Sh. Ashok I-181 Janta Jeewan Camp Tigri village	D/W	P P P P S P P P P P P S P P P P P P P P P P P P P	11 Days	-do-	1689-00	
20.	Ravinder S/o Attar Singh	D/W	P A A A A S A A A A A A S A	Nil	-do-	Nil	
	Daily Total		12 13 14 16 - 18 19 17 17 18 18 - 19	181 Days	G. Total	27790-00	
	Initials of person marking the daily attendance		a a a a s a a a a a a s a				
	Initials of Inspecting Officer		S.				

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.

HEALTH DEPARTMENT

Sheet 2.

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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
11	Naveen S/o Bishan Dass 17/843 N.D.M.C Staff Qtrs. SAN Martin Marg Chanakya Puri	D/W	19 20 21 22 23 24 25 26 27 28 29 30 31	8 9 days	1517+CA	13664-00	Attested
				10 days		15357-00	
12.	Maheshchand S/o Poemchand	D/W		05 days -do		768-00	Attested
13.	Gaje Singh S/o Sh. Balwant Singh 724 – K Block Mangol Puri	D/W		11 Days -do		1689-00	Attested
14.	Dinesh S/o Sh. Om Parkash 304-305 Block D-1 Sultan Puri N.D	D/W		11 Days -do		1689-00	Attested
15.	Parveen S/o Sh. Sunder Lal A-176 Daulli Village New Delhi	D/W		11 Days -do		1689-00	Attested
	Daily Total		8 9 10 12 14 15 13 13 14 14 15	137 Days	G. Total	21034-00	
	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.

Sanitation Officer Chief Sanitation Inspector Sanitation Inspector

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.

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 797. (From 18/8/09 To 31/8/09)

Circle No. X Voucher No. .... Dated ....

In continuation of **Muster Roll No.** Fresh

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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. (7830-00)	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
																					4	4	4	4	–	5	5	5	5	5	5	–	5	51 days	151-P.A		
6	Amit S/o Sh. Balkishan WZ-100 Balmiki Vihar Palam village	D/W																					P	P	S	P	P	P	P	P	P	S	P	09 d		1382-00	Amit (Attested)
7	Sagar Kr S/o Ashok Kr. 19/288 N.D.M.C Flat Bapu Dham N.D	D/W																						P	S	P	P	A	P	A	P	S	P	06 d	-do-	921-00	Sagar Kumar (Attested)
8	ManJeet S/o Rajender 15/16 T Huts Subzi mandi J.J Colony Ragubir Nagar Delhi	D/W																						P	S	P	P	P	P	P	P	S	P	08 d	-do-	1228-00	[signature] (Attested)
9	Shashi Rani D/o Ragubir B-805 Gharoli Dairy Colony Mayur Vihar	D/W																								P	P	P	A	P	P	S	P	06 d	-do-	921-00	Shashi (Attested)
10	Seema w/o Sukhbeer	D/W																			P	P	P	P	S	A	P	A	P	P	P	S	P	09 days	-do-	1382-00	सीमा (Attested)
	Daily Total																				5	5	6	8	–	9	10	8	9	9	10	–	10	89 Days	G. Total	13664-00	
	Initials of person marking the daily attendance																						[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]				
	Initials of Inspecting Officer																						[initials]							[initials]							

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

M.O.H. Sr. A.O

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.

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/360/CMO/40 dt 18/8/09

HEALTH DEPARTMENT

(44) daily wager 8/12, 4/13 @ 151+CA per day.

MUSTER ROLL NO. 797 (From 18/8/09 To 31/8/09)

(1+8) = 9 Sheet.

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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 ... (1–31)	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	Pasdeep Kr. S/o Sh. Sunder Lal A-176 Dauli village New Delhi	B/W	P P P P S P P P P P S P ISSUED BY MEDICAL STORE DEPOT

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ... (1–31)	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
2	Sharda ~~Saad~~ W/o Pardeep DEX/22 A Block-DEXt. Near Laxmi vihar Mohan Garden Delhi	D/W	P P P P S P P P P P S P

Daily Total 4444+555555=51 Days G. Total 7830-00

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 ... ...

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

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

Rs.	P.