HEALTH DEPARTMENT

MUSTER ROLL NO. 4/80. (From 01/5/08 To 13/05/08)

Circle No. III Voucher No. 37/H 11/6/08 Dated.....

In continuation of Muster Roll No. 4139.

Extra sheet-II

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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 per day Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
11	Sat Pal S/o Sukveer Sigh Housh No 145 Near Sharan Pur Delhi	D/W S/K	P P P P P P P P P P P P P A B S H P P P P P P P P P P P P P	11 days	135-25 +CA	1515-00	
12	Anil S/o Ram Avtar 11 Hsi Jam Basti Tee m.m. New Delhi E II 174 M-Sim	4	P P P P P P P P P P P P P B r e a k P P P P P P P P P P P P P	11 days	do	1515-00	Strictly not to pay for want of Receiving of complete residential addres. 9.6.08
13	Seema W/o Shri Kishan Sweeping Cadre Hsi Jam Basti Tee m.m. New Delhi	4	P P P P P P P P P P P P P B r e a k P P P P P P P P P P P P P	11 days	do	1515-00	
	Pay this staff Rs 18180- BIRTH GAR 18180-						
	Daily Total			133	G. Total	18180-00 only.	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Reception 4 P.M 3/6/08 Entry in page No 25 serial No 614.

3/6/08

Pay Rs. 18180= (Rupees One Eighteen thousand one hundred Eighty 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.

M.O.H.

CANCELLED Sr. A.O Released for Payment (V.K. GOEL) AO (PH)

Grand Total of this Muster Roll ... ...

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

All the signichar Attested S.LTI S.LTI Attested fully. Rs P

Balance Paid

HEALTH DEPARTMENT

Cover Sheet-I

MUSTER ROLL NO. 4180 (From 01/5/08 To 13/05/08)

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4139

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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 Ot r.12	Vinod S/o Ram Pal Hei Jam Basti Tee m.m. New Delhi	D/W Sk.	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 P	11 days	135-25 +CH	7488-00 1515=00	Strictly cost to pay for want of reading of complete residential addres. Vinod Sig Attd DSE
8	Sixa W/o Jagsaran Kham Market New Delhi H.No 33	G	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 P	11 days	do	1515=00	—do— Sig Attd DSE
9	Usha w/o Sonveer H.No 45 Kham Mar Kit New Delhi	G	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 P	11 days	do	1515=00	—do— Sig Attd DSE
10	Geeta W/o Kandan Lal Kham Mar Kit H.No 66 New Delhi	G	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 P	08 days	do	1102=00	Sig Attd
		Daily Total		100 days	G. Total	13635=00	
		Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

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

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

Grand Total of this Muster Roll ... ...

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

Rs.	P.

O.O.NO - 136/D/PA/MOH Dt. 14/02/08 B.O.T.

(16) daily wager Sk, C/B @ 135.25Rs/ day+CA 66/-Pm

(142) Total sheet = 3

HEALTH DEPARTMENT

MUSTER ROLL NO. 4180 (From 01/05/08 To 13/05/08)

Circle No. III Voucher No. Dated

In continuation of Muster Roll No. 4139.

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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 per day Rs. P.	Amount Rs. P.	Sign. or thumb impression of the payee and dated initials of the paying officer made at the time of payment
1	Smt. Ram Niwasi w/o Kishor Palika Dham New Delhi	Sk	11 days	135-25 +CA	1515=00	Strictly not to pay for recording of complete residential address. R/11 Attested B/DSC 9.5.08
2	Smt. Kamlesh w/o Parkash Palika Dham New Delhi	"	11 days	do	1515=00	Sd/ Attested B/DSC
3	Sh. Harbhajan S/o Mangal Hejdan Bastee n.n. New Delhi	"	10 days	do	1377=00	Harbhajan Sig Attested B/DSC
4	Sh. Amit S/o Mehendar Khem Mankit Homolus New Delhi	"	11 days	do	1515=00	AMIT Sig Attested B/DSC
5	Sh. Surender Pal S/o Azed Pal Hejdan Bastee n.n. New Delhi	"	11 days	do	1515=00	Surender Pal Sig Attested B/DSC
6	Sh. Ajay S/o Jagsaran Hejdan Bastee n.n. New Delhi	"	04 days 59 days	do	0551=00 7988=00	Sig Attested B/DSC

Daily Total

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