HEALTH DEPARTMENT

MUSTER ROLL NO. 4195 (From 01/05/08 To 17/05/08)

Contd-sheet – II

Circle No. V Voucher No. ~~2814~~ 9417 Dated 17/5/2008

In continuation of Muster Roll No. 4154.

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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.	Sh. Ajeet S/o Sh Rajinderker Add, H No-36 Palikagram. Sarojani Nagar N.D	Daily wager SK	14 days	129 dys @ 135.25 CR	1776=00 1928=00	Sig Attested
12.	Sh. Sanjay Kr S/o Sh Moolchand — do — Add H.N.A-63, Pratap Nagr. Nayar Vihar phase I. Cell No 9.	— do —	15 days	2065=00	Paid	
13.	Smt. Rakhi W/o Sh Rajesh — do — Add H.No - B-379 Ranapratap Bagh Sajan Park. Delhi		15dy do	2065=00		Sig Attested
14.	Sh. Om Prakash S/o Sh Mahadev Prasad Add H.No - 21/C. Narella Delhi-40.		15dy do	Paid 2065=00	Om Prakash	Sig Attested
	Pay this staff Rs 25884. BIFR N/L	Daily Total	188 dys	G. Total	25884=00	
	SAIL 25884	Initials of person marking the daily attendance				
		Initials of Inspecting Officer				

Received on 4/6/08 at 4-10 PM Entry in Page No 26 Serial No 683

Pay Rs 25884/- (Rupees Twenty five thousand Eight hundred Eighty 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.

VERIFIED FOR CASH/CHEQUE PAYMENT

M.O.H.

Sr. A.O.

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

Grand Total of this Muster Roll ... Serial No. 1 to 14 all sig Attested and fully Paid

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

L.A. No. H-128

Rs.	P.
Bill	

24/6/08

25/6/08

HEALTH DEPARTMENT

MUSTER ROLL NO. 4195 (From 1/5/08 To 17/05/08)

Contd. Sheet-I

Circle No. V Voucher No. Dated.

In continuation of Muster Roll No. 4154

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
6.	Sh. Sunil Kumar S/o Ram Kishan H.No-171/D2 Ward No-2 Mehrauli N.D.	D/Sk.		6 days	@ 135/75	8812-00 Paid 8262-00	Sig Attested
7.	Smt. Ryna W/o Prakash Add. H.No-304, 85 Block Pachkuyan Rd. Delhi	Sk		14 days	do	Paid 1928-00	Sig Attested
8.	Sh. Azad Singh S/o Ram Chander Add. H.No-74, Block-C, Khambra J.J. Colony Ambedkar Nagar N.D.	Sk		15 days	do	Paid 2065-00	Sig Attested
9.	Sh. Subhash S/o Bhajan Lal Add. H.No-2/27 Bapu Dham N.D	Sk		15 days	do	Paid 2065-00	Sig Attested
10.	Sh. Sandeep S/o Om Prakash Add. H.No-209, Vill+P.O. Ghogha. Delhi	Sk		15 days	do	2065-00	Sandeep Sig Attested
			Daily Total	129 days	Gr. Total	17761-00	
			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- 162/D/PA/MOH Dt 22/02/08

(14) Daily wager SK, L/B @135-25 Per day + CA 686/- pm.

(142) Total sheet = 3.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4195 (From 1/5/08 To 17/05/08)

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4154

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 S 5 6 7 8 9 10 11 S 12 13 14 15 16 17 18 S 19 20 21 22 23 24 25 S 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
1.	Sh. Ravinder S/o Attar Singh Add. H.No-16/247 Trilokpuri Delhi-91	Daily wager SK	P P P