

**Contingent Bill Number :** 30307080900025

**Disbursement Type:** Cash

**Bill Type:** ImprestBills

**Fund:** NDMC Municipal General Fund

**Bill Date:** 08-Jul-2008

**Segment:** GENERAL FUND

**Sub Segment:** CASH IN HAND

**Field:** PUBLIC HEALTH ACCOUNTS BRANCH

**Sub Field:** (PUBLIC HEALTH) SANITATION CIRCLE 10

**Functionary:** NDMC

**Payable To:** Secretary,NDMC

**Sanction By:** Chairman

**Sanctioned On:** 16-Jan-2008

**SanctionDetails:** Sactioned by Chairman, NDMC vide no. 462/PS dated 16-1-08

**Bill Status:** CREATED

**Narration:** Payment of 43 daily wagger safai karamchair/lorry beldar circle no. 10 @ Rs. 135.25 plus C.A.

**Remarks:**

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	77514
<b>Gross Amount</b>					77514

**Deductions:**

Code	Payable To	Function	Account Code	Account Head	Amount
<b>Total Deduction</b>					0
<b>Net Amount</b>					77514

Net Payable in Words :

<b>Created By</b>	dharam.pal	<b>Verified By</b>	
<b>Confirmed By</b>		<b>Approved By</b>	
<b>Final Approved By</b>			































# HEALTH DEPARTMENT

**MUSTER ROLL NO.** 4800

(From 15/08 To 17/05/08)

Cont. Sheet-II

Circle No. X Voucher No. 4159 Dated 15/08/08  
 In continuation of Muster Roll No. 4159

Accountant (HG) [Signature] CHIEF MEDICAL OFFICER [Signature]

**PART-NOMINAL-ROLL**

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ..... To .....																															Total	Rate Rs. per day	Amount Rs.	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							
11.	Sr. Sula Ram 810 Malpaya A/3/231, Kerdala.	D/W	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	14	15 days	Rs. 2065	[Signature]			
12.	Sr. Leela Raf & Shu Chonan J-367, Ambalakar Nya	D/W	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	15 days	Rs. 2065	[Signature]			
13.	Sr. Pradap h. h. Bhuin F-217 mittal colony Pachled Pur.	D/W	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	15	15 days	Rs. 2065	[Signature]			
14.	Sr. Asay kr & Rajendra 154/105 Trilok Pur.	D/W	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	11 days	Rs. 1575	[Signature]			
15.	Sr. Ram Das & Padi Ram E-1 Kalu Sarani, I.T.	D/W	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	13	13 days	Rs. 1790	[Signature]			
Daily Total			SSS-SSSSSS-44434																															208			Rs. 28638			
Initials of person marking the daily attendance			[Handwritten initials]																																					
Initials of Inspecting Officer			[Handwritten initials]																																					

Pay Rs. [Handwritten amount] (Rupees)

Accountant (HG) [Signature] M.O.H. [Signature] Sr. A.O. [Signature]

Grand Total of this Muster Roll ...

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







0-0-06-1681 D | 14 | 22 | 02 | 08

# HEALTH DEPARTMENT

**MUSTER ROLL NO.**

Circle No. **X** Voucher No. **4159** Dated .....

4200

(From 01/5/08 To 19/05/08

17/5/08

17/5/08

(179) Total sheets = 10

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From .....																															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	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							
1.	Sh. Kishor Sh. Madan Lal 101/19 Trilock Puri N.D.	D/W	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	17	13525 ca	2065 ca	Paid Dr 21/5/08				
2.	Sh. Vinod Sh. Shera 6/4 st. Columbus School hale Market N.D.	D/W	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	ca	1998 ca	Received paid Dr 17/5/08				
3.	Smt. Sonia Wfsh. Suresh <del>43/43 Hale No 2</del> 7/3 435 Hale No 2 N.D. Bagher	D/W	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	ca	2085 ca	21/11/08 paid Dr				
4.	Sh. Pradyesh Sh. Man Singh H-I Palika Hale Mkt N.D.	D/W	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	ca	1515 ca	shri Paid Dr 17/5/08				
5.	Sh. Gaurav Sh. Ram Naras 2-109/190 Ghugi no Palika Hale N.D.	D/W	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	ca	1790 ca	Received paid Dr 17/5/08				
		Daily Total	S	R	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	68	ca	9363					
		Initials of person marking the daily attendance	RSRS MHANRGR NAFKRS																																					
		Initials of Inspecting Officer	RSRS																																					

Pay Rs. **(Rupees)**

Accountant (HG) M.O.H. Sr. A.O

Grand Total of this Muster Roll ...

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.

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

Rs. P.

44 dark wages 81K, 4130