

HEALTH DEPARTMENT

MUSTER ROLL NO. 4213

Circle No. X Voucher No. 4172 Dated 1/5/08 (Fm 1/5/08 To 31/5/08)

M. S. Dasgupta - SIK, 4/B, 8

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From																															To		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							
			Daily Total																															Total					G. Total	
31	Dr. Sanjay D. on probation Delhi Cant. V.H. Tharoda	Div	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	P	P
			3585																															3442						
32	Dr. Anant Pr. Das Wed. Probation	Div	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	P	
			27 days																															3442						
33	Dr. Chandan Kumar H.No 17 from mkt MD.	Div	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		
			27 days																															3318						
Pay Rs. 116630/- (Rupees)		Initials of person marking the daily attendance Initials of Inspecting Officer	323-323333-2233-333333		347		116630																																	

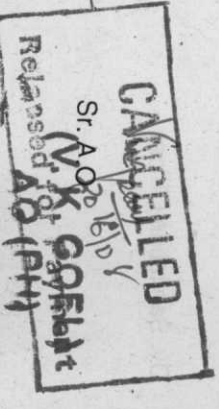
Accountant (HG)

CHIEF MEDICAL OFFICER

Received on 10/6/08
At 5 P.M. Entry No. 656

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.



Grant total of this Muster Roll ... Sig | ver | RTI ... Attached from SI. No

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

Rs. P.

SI X

HEALTH DEPARTMENT

MUSTER ROLL NO.

4913

(From 1/5/08

To 31/5/08

Cont Sheet-5

Circle No. X Voucher No.

In continuation of Muster Roll No.

4198

Dated

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address 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						
26.	Bud. Jai Singh Kaur W/O A-23, DDA Flat, Conk	Dlw	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	24 Days	135.25	3305	(Signature)
27.	Sk Brij Bahadur Sh Janku Chaud 417 T. Lal - Pali, Math Ganeta, Math Road.	Dlw	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	21 Days	-	3718	(Signature)
28.	^{smf} Roy Joo W/O Satish. e-24 Fulkra Dham Gate Market H. Delhi	Dlw	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	21 Days	-	3718	(Signature)	
29.	Sh. Shammari Sh. Prasad A-1319 Minto Road New Delhi	Dlw	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	21 Days	-	3718	(Signature)	
30.	Sh. Sagar Sh. Prasad 81, Staff Quarter, Soldier's Quarters	Dlw	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	27 Days	-	3718	(Signature)	
		Daily Total																																770	G. Total	106028			

Pay Rs. (Rupees)

Initials of person marking the daily attendance

Initials of Inspecting Officer

Accountant (HG)

CHIEF MEDICAL OFFICER

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll ...

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

Rs. P.

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.

MUSTER ROLL NO. 4213 (From 1/5/08 To 31/5/08) **HEALTH DEPARTMENT**

Circle No. X Voucher No. 4172 Dated

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate	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									
21	Rajiv s/o Premchand 915018, Galinog, Dharampara Garolki Nagar N-D-31	Plw	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	23 Days	135.85	5167	NEP for Reading of complete Register paid by Govt			
22	Sarora s/o Arun 6061, Gali, Galinog Mardhi, N-D-1, Garolki	Plw	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	27 days	3718	Saravali Pata dr rec				
23	Smt Kamini s/o Kankar 71170 Gargaon Village Gargaon (Monyans)	Plw	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	27 Days	3718	— do — 2 RNF paid paid by Govt					
24	Smt Shw. Akash s/o 121, Balmika, Garolki	Plw	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	24 days	3305	Shrikant paid paid by Govt					
25	Smt Jagan s/o Vinay O-6, Type-I, Subhas New Del.	Plw	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	27 Days	3718	— do — paid by Govt					
		Daily Total																																			638	G-Total	87851			
		Initials of person marking the daily attendance																																								
		Initials of Inspecting Officer																																								

Pay Rs. (Rupees)

Accountant (HG)

CHIEF MEDICAL OFFICER

Contk sheet - II

Accountant (HG)

M.O.H.

Sr. A.O.

Grand Total of this Muster Roll ...

Rs.

P.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 4913

Circle No. X Voucher No. 4178
 In continuation of Muster Roll No. 4178

Dated 1/5/08 (From 4/13 To 31/5/08)

G.M. S. No. 111

PART-NOMINAL-ROLL

Accountant (HG) [Signature]

CHIEF MEDICAL OFFICER

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From																															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							
16	Dr. Brijender Singh A H.No. 13-A, Nangon Bada Vill. Korhi, Neh	Diw	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	27	13585	3718	[Signature]	
17	Dr. Sakin Chand da R-2/84, Lalita Park Lami Nara,	Diw	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	25	3718	9891	[Signature]	
18	Shri Karam Ma Dargali H.No. 32, Palaha Bhandu Nandwal	Diw	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	25	3718	3442	[Signature]		
19	Dr. Banhi K. Tejpal Group No. 101, A/10 meter Palhi Dhan, Neh	Diw	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	25	3580	3580	[Signature]		
20	Dr. Tarun Jo Karam Singh 112, Nardhi, mury	Diw	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	26	570	7025	[Signature]		
Daily Total																																					570		7025	

Pay Rs. [Amount] (Rupees)

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

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.
-----	----

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.

HEALTH DEPARTMENT

MUSTER ROLL NO.

4213

(From

1/5/08

To

31/5/08

Cart-sheet-II

Circle No.

X

Voucher No.

In continuation of Muster Roll No.

4192

Dated

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Pay Rs. (Rupees)
			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.	Makesh s/o Jagdish D-616 Chatarpur Phadki New Delhi - 74	Plw	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	23 days	
																																				13525	
																																		3167			
12.	Sh. Sundeep S/o Amarful F-148, Aram Bagh New Delhi.	Plw	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	23 days		
																																		3167			
13.	Sh. Kamal Singh No money D.I. Sethu-D D.I. and Raja Grewal	Plw	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	27 days			
																																		3718			
14.	Sh. Kamal Singh No money D.I. Sethu-D D.I. and Raja Grewal	Plw	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	26 days			
																																		3582			
15.	Sh. Jinit Kumar do. Randhu Singh B-41, T. Secdang Nanglaor.	Plw	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	26 days			
																																		38876			

Accountant (HG)

CHIEF MEDICAL OFFICER

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

Accountant (HG) _____ 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. _____

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.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4913

4913

(From 1/5/08 To 31/5/08)

Over sheet

Circle No. X Voucher No. 4928 Dated 1/5/08

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate Rs.	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				
6	Sh. Deopal - S.O. on Probation N-149150, R.P.F. line Darga Basti	Plw	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	27 days	135.25	3718	Paid Dr. Bhat
7	Sh. Vikram S.O. on Probation N-149150 R.P.F. line Darga Basti	Plw	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	27 days	de	3718	Paid Dr. Bhat
8	Sh. Anam ver S.O. on Probation N-149150 R.P.F. line Darga Basti	Plw	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	23 days	de	3167	Paid Dr. Bhat
9	Sh. Koteswari Ram Narayan A-182, DDA flats, Ranjini Magan	Plw	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	25 days	de	3442	Paid Dr. Bhat
10	Sh. Vinay S.O. on Probation 24, Bahmika Basti	Plw	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	23 days	de	3167	Paid Dr. Bhat
Daily Total			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	23 days	2588	35526	
Initials of person marking the daily attendance			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				
Initials of Inspecting Officer																																					

Pay Rs. (Rupees)

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

Grand Total of this Muster Roll

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

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.

D.O.No - 69/D/CMO (HQ) D-11/3/08

HEALTH DEPARTMENT

MUSTER ROLL NO.

4213

(From 1/5/08

To 31/5/08

(35) Clerk Dayer S/M, C/B, B

(146) To the sheet = 7

Circle No. X Voucher No.

Dated

In continuation of Muster Roll No. 4172

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.....																															Total	Rate per day	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. Indra Bahadur Sh. Subhash Addl- 565 All Govt Lodh Pard	Diu	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	24	135.85	3718	Signature
2	Akash Sh. Dairkishan Mrs Manak Bhanan Bhabhar Shah Zafar mang I.T.O N.D.	Diu	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	25	3442	Signature	
3	Sh. Sobharaj Sh. Raju C-3259, Gelemf. Udyan mang N.D.	Diu	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	27	3718	Signature		
4	Sh. Seth Ram Sh Ram Comb. A8-12 Anjane & Talus Kalam Bar	Diu	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	27	3718	Signature		
5	Sh. Sanku Ram Sh Virend k. S-9 M. Govt Odh.	Diu	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	27	3718	Signature		
			Daily Total																															133	G-Total	18314			
			Initials of person marking the daily attendance																																				
			Initials of Inspecting Officer																																				

Pay Rs. (Rupees)

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll

Rs. P.

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