Confd 3030 708/000338

View Contingent Bill Help

Disbursement Type*	Cash	Bill Type*	Imprest / MR Bills
Reference Number for Cash Branch	30310070800070		
Fund *	NDMC Municipal General Fund	Bill Date*	11/10/2007
Segment*	GENERAL FUND	Sub Segment*	CASH IN HAND
Field*	PUBLIC HEALTH ACCOUNTS BRANCH	Sub Field*	PUBLICH HEALTH ACCOUNTS BRANCH
Functionary*	NDMC		
Sanction By*	Chairman	Sanctioned On *	11/06/2007

Sanction Details: Sanction by Chairman dt. 11/06/2007 vide O.O. No. D/542/PA/MOH dt. 06/07/2007

Created By	dharam.pal	Verified By	
Confirmed By		Approved By	
		Bill Status	CREATED

Narration: Payment to 20 Daily Wager Anti Malaria Gangman Circle No. 3 & 4 @ Rs.133.45p. per day + Rs. 66/- CA

Remarks:

Function Name	Account Code*	Account Head	Amount*	Details
Public Health	2101000	SALARIES,WAGES AND BONUS	67768	Click

Gross 67768

Deductions

Account Code	Account Head	Amount	Details
		0	Click

Deductions 0

Net Payable 67768

Net Payable in words Sixty Seven Thousand Seven Hundred And Sixty Eight Rupees Only

*- Mandatory Fields

Back Modify

de. O.O.No- D/542/PA/M.O.H/07 dt 6/07/07.

HEALTH DEPARTMENT

(1+2) Total Sheet = 4 Four

MUSTER ROLL NO. 3772. (From 01/9/07 To 30/09/07.)

Circle No. III & IV Voucher No. 55/H (1/2) Dated 15/10/07

In continuation of Muster Roll No. 3752.

16/10/07

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
16.	Sh. Manish Kumar S/o Sh. Mancher Lal B-188 पांडव नगर (मदर डेयरी) वि. 92	Sanitary A.M.h. TMR.	P	S	P	H	P	P	P	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	@135.45 +CA	3402=00	मनीष कुमार Paid
17.	Sh. Kailash Chand S/o Sh. Biraj Bhushan -do- B65 न्यू अशोक नगर दिल्ली 96		P	S	P	H	P	P	P	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Paid
18.	Sh. Rakesh S/o Sh. Surjeet Singh. 69 पालिका ग्राम लक्ष्मी बाई नगर ND-23	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	18/10/07 Paid
	Sh. Pushpender Kr. S/o Sh. Budh Sain A 78/28 जौहरी कालोनी मंडावली ND-92	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 day	-do-	3402=00	18/10=62 Paid
	Sh. Sunil Kr. S/o Sh. Suresh Kr. H-8. पालिका ग्राम गौला मार्केट ND-	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 day	-do-	3402=00	Sunil Paid
		Daily Total	20	S	20	20	20	20	20	20	S	20	20	20	19	19	20	S	20	20	20	20	20	20	S	20	20	20	20	20	20	S	-	498 day	G. Total	67768=00	
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

Sign attested Fully Paid vouchers No 55/H. 8/III 17/10/07

Pay Rs. 67768/- (Rupees Rs. Sixty Seven thousand Seven hundred Sixty Eight only)

Accountant (HG) (M. C. MISHRA) AAO (Public Health) M.C.D. Palika Kendra

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

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

CANCELLED Released for Payment

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

MUSTER ROLL NO. 3772. (From 01/09/07 To 30/09/07)

Contd. Sheet - III

Circle No. III & IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3752.

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.	Sh. Manoj Kumar S/o Sh. Dharamlal A68 D/S इस्ट ऑफ कैलाश दिल्ली	D.W. A.M.G.	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	(155.45) + C.A.	3402=00	Manoj Paid
12.	Sh. Ramesh S/o Sh. Suresh B23 पीपला चौक गोल मार्केट नईदिल्ली।	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Ramesh 16/10/07 Paid
13.	Sh. Vikram Kr. S/o Balip Kumar 1 D/S पृथ्वीराज रोड खान मार्केट Home-क्वार्टर ND-3	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Vikram Paid
14.	Sh. Mukesh S/o Sh. Pal Chand G16 Home क्वार्टर पृथ्वीराज रोड खान मार्केट ND-3	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Paid
15.	Sh. Rahul S/o Sh. Ram Avtar 86 D/S पृथ्वीराज रोड खान मार्केट ND-3	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Rahul Paid
	Daily Total		15	S	15	15	15	15	15	15	S	15	15	15	14	14	15	S	15	15	15	15	15	15	S	15	15	15	15	15	15	S		378 days	G. Total	50758=00	
	Initials of person marking the daily attendance			S		H					S							S							S							S					
	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

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

MUSTER ROLL NO. 3752 (From 01/09/07 To 30/09/07)

Cont. Sheet - II

Circle No. III & IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3752

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
6	Sh. Tara Chand S/o Sh. Ram Pal 428 कड़ कड़ डूमा, इन्द्रपुरी दि. 92	Daily wager A. M. G.	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	@133.45 + CA	3402=00	Tara Chand Paid
7.	Sh. Sunil Kumar S/o Bedi Ram 58 न्यू गोपाल पुर नजदीक सोमबाजार दिल्ली 51	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Sunil Paid
8.	Sh. Om Perkash Pathak S/o Sh. Shiv Charan शिव विहार गली नं 2/53 करावलनगर दिल्ली	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Paid
9.	Sh. Sanjay S/o Sh. Banarshi Das A II घोसिका निकेतन आर. के. आश्रम गली नं. 1	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Sanjay Paid
10.	Sh. Vishwash S/o Sh. Ram Perkash. 22/C कल्पना अपार्टमेंट सेक्टर 5 द्वारका UP.	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	-do-	3402=00	Vishwas Paid
	Daily Total		10	5	10	10	10	10	10	10	5	10	10	10	9	9	10	5	10	10	10	10	10	10	5	10	10	10	10	10	10	5		248 days	G. Total	33748=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.

Vrde -0-0-No- 3479 | 1/11

(20) Charity Lager A.M.O. @ 133.45 C.A.

Total Amt 1+3=4 Contra-Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 3772 (From 01/09/07 To 30/09/07)

Circle No. III & IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3752

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
1.	Sh. Vikash S/o Sh. Jai Parkash RZ 153/345 शिवपुरी गली नं. 2 वेस्ट सागरपुर दिल्ली 46	Daily wager A.M.G.	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	@ 133.45 + C.A.	3402-00	VIKAS 16/10/07 Paid
2.	Sh. Ranjeet Singh S/o Sh. Nihal Singh. 9340 कटरा गंगाबिशन, गऊशालामार्ग बिशन रोड नं. 6	-do-	P	S	P	H	P	P	P	P	S	P	P	P	A	A	P	S		P	P	P	P	P	S	P	P	P	P	P	P	S		23 days	"	3150-00	Paid.
3.	Sh. Manish Kumar S/o Sh. Jai Pal 16/232 बापूधाम चाणक्यपुरी न.दि.21	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	"	3402-00	मनीष कुमार Paid
4.	Sh. Ravi Kumar S/o Sh. Bijender 9 D/S अली गंज MD. 3	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	"	3402-00	रवि कुमार Paid
5.	Sh. Rajeer Sharma S/o Sh. Ashok Kr. 57 न्यू मोतीनगर, सोमबाजार दिल्ली 15	-do-	P	S	P	H	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S		25 days	"	3402-00	Paid
	Daily Total		5	5	5	5	5	5	5	5	5	5	5	5	4	4	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5		125 days	G. Total	16738-00	
	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.