HEALTH DEPARTMENT

MUSTER ROLL NO. 3960 3988 (From 01/01/08 To 31/01/08)

Cont. Sheet-II

Circle No. XII Voucher No. 49/4 Dated.....

In continuation of Muster Roll No. 3944. 19/12/07

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
5	sh. Charan singh s/o Babulal C. 31/63 Kali Badi marg N. Delhi	SK	P P P P P S P P P P P P P S P P P P P S P P P P P H S P P P P P	27 days 106		7764 3506 3669 — 00	4201 11-2 Signature.
6	sh. Sikander s/o Kallu O.No 32 mamelia marg new Delhi	"	A A A A A S A A A A A A A S A A A A A H S A A A A	4 days		544 — 00	Signature.
7	Smt. Sannni s/o Murlidhar Q.N. 41 mandir marg N. Delhi	"	P P P P P S P P P P P P P S P P P P P H S P P P P P	27 days		3506 3669 — 00	Signature.
8	sh. Mahesh s/o Bhdram village katwariya sarai B-188 N. Delhi	"	P P P P P S P P P P P P P S P P P P P H S P P P P P	27 days		3506 3669 — 00	Mahesh Signature.
	Pay to staff Rs 25955 —			191		25960 — 00	
	Daily Total			1814	G. Total	12804 — 00	
	Initials of person marking the daily attendance					25960 — 00	
	Initials of Inspecting Officer		R B B B			25955 —	

Received on 6/2/08 at 9.30 AM Entry in Page No. 17 Serial No. 402

Pay Rs. 25955 — (Rupees Rs. Twenty five thousand nine hundred fifty five only)

Accountant (HG) 19.2.08

M.O.H. Sr. A.O.

CANCELLED Released for Payment

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

Grand Total of this Muster Roll ... ... fully paid upto 8

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

Total amount paid (in words) Rupees.....Balance Paid

Rs.	P.

O.O. No- 1168/D/ PH/ HQH Dt 11/12/07.

(08) daily wager 01/01/08

HEALTH DEPARTMENT

(171) Total Sheets 2.

MUSTER ROLL NO. 3960 3988 (From 01/01/08 To 31/01/08)

Circle No. XII Voucher No. Dated.

In continuation of Muster Roll No. 3944

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
1	Sh. Jagdish S/o Manohar Qtr 70 Pulia-gram Laxmi Bai Nagar New Delhi	S.K	S S S H S	27 days	127-00	3506 00 3669 00	Paid 5104/21
2	Sh. Rohit S/o Tara 362 Tirhak puri N-Delhi 41	"	S S H S	27 days		3506 00 3669 00	Paid Rohit
3	Smt Savitawy. Subash B-65A Dwarka Puri New Delhi	"	S S H S	27 days		3506 00 3669 00	Paid 2112/21
4	Sh Vikram S/o Kamchand 21/35 Tirhok puri N. Delhi	"	A S S A S	25 days		3506 00 3407 00 3339 00	Paid Vikram
	Daily Total			106	G. Total	2764 00 14,409 00 14404 00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		B B B B				

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.