Page No 25
SL No 59

96/H
15/9/09

**Contingent Bill Number :** 30309091000125

| | | | |
|---|---|---|---|
| **Disbursement Type:** | Cash | **Bill Type:** | ImprestBills |
| **Fund:** | NDMC Municipal General Fund | **Bill Date:** | 14-Sep-2009 |
| **Segment:** | GENERAL FUND | **Sub Segment:** | CASH IN HAND |
| **Field:** | PUBLIC HEALTH ACCOUNTS BRANCH | **Sub Field:** | (PUBLIC HEALTH) SANITATION CIRCLE |
| **Functionary:** | DIRECTOR (PH) | **Payable To:** | Secretary,NDMC |
| **Sanction By:** | Chairman | **Sanctioned On:** | 12-Jan-2009 |
| **SanctionDetails:** | Office Order No. D-203/CMO(HQ) dated: 18.05.09 vide approval of Chairman No. 171/D/PS dated: 12.01.09 | **Bill Status:** | CREATED |
| **Narration:** | Payment 21 daily wagers S/K in circle No. -12 w.e.f. 01.08.09 to 16.08.09 @Rs151+CA per day | | |
| **Remarks:** | | | |

| Code | Payable To | Function | Account Code | Account Head | Amount |
|---|---|---|---|---|---|
| | | Public Health | 2308003 | GARBAGE REMOVAL CLEARANCE | 34391 |
| | | | **Gross Amount** | | 34391 |

**Deductions:**

| Code | Payable To | Function | Account Code | Account Head | Amount |
|---|---|---|---|---|---|
| | | | | | |
| | | | **Total Deduction** | | 0 |
| | | | **Net Amount** | | 34391 |

Net Payable in Words :

| | | | |
|---|---|---|---|
| **Created By** | neelam.uniyal | **Verified By** | |
| **Confirmed By** | | **Approved By** | |
| **Final Approved By** | | | |

Sheet-III

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 751 (From 1/8/09 To 16/8/09)

Circle No. XII Voucher No. 9611 Dated 15/9/09

In continuation of Muster Roll No. 702

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. | Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment |
|---|---|---|---|---|---|---|---|
| 16 | Smt Laxmi Wy. Chanderpal F 494 J.J Comp Tigri N. Delhi | S-K | | 165 Days 12 days | 157 Kn 66 P. | Rs 25333-00 ~~25486-00~~ 1842-00 | |
| 17 | Smt Usha Wy. Rakesh Devi F 495 Tigri N. Delhi | " | | 12 days | 26- | 1842-00 | |
| 18 | Sh. Vinod S/o Puttan S-14-B-132 J.J Comp Tigri N. Delhi | " | | 12 days | 26 | 1842-00 | |
| 19 | Sh. Rupesh Kr S/o Rakesh Kr F 492 J.J Comp Tigri N. Delhi | " | | 1 days | 26 | 154-00 | |
| 20 | Sh. Sutpal S/o Lalchand 189 Aligunj Lodhi Road N. Delhi | " | | 09 day | 26 | 1382-00 | |
| 21 | Smt Madhu Wy. Bijander E IV 126 Nand Nagri N. Delhi | " | | 13 day ~~224 Days~~ ~~229 Days~~ ~~214 Days~~ | 26 | 1996-00 Rs 34,391-00 | |
| | | | Daily Total | | G. Total | ~~27944-00~~ 34544-00 | |
| | | | Initials of person marking the daily attendance | | | | |
| | | | Initials of Inspecting Officer | | | | |

Net Payable Rs 34,391-00

Received on 08/9/09. Entry has been made on page 57 at Sr. No. 1556.

Pay Rs. 34,391-00 (Rupees Thirty Four thousand three hundred ninety only.)

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.

CANCELLED

Date Released for Payment

Grand Total ... this Muster Roll ...

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

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

Sig Attd Sr No 1 to 21

Rs. P.

Sheet-II

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 751 (From 1/8/09 To 16/8/09)

Circle No. XII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 702

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 |
|---|---|---|---|---|---|---|---|
| 11 | Smt Raj Rani D/o, Mahinder H-70 Laxmi Bai Nagar N. Delhi | S.K | | 13 days | 1996-00 | ~~5967~~ 5967-00 | राजरानी SIS AHM |
| 12 | Smt Maya W/o Om Karsingh F-141 J.J Comp Tigri N. Delhi | " | | 10 days | 1535-00 | 1535-00 | माया SIS AHM |
| 13 | Sh. Monu S/o Ghanshayam F-136 J.J Comp Tigri N. Delhi | " | | 13 days | 1996-00 | 1996-00 | मोनू SIS AHM |
| 14 | Smt Rekha W/o Roshan W/122 V/2 Fesh III Seemapuri N. Delhi | " | | 13 days | 1996-00 | 1996-00 | रेखा SIS AHM |
| 15 | Smt Anita W/o Murli Lal F 137 J.J Comp Tigri N. Delhi | " | | 13 days | 1996-00 | 1996-00 | अनिता SIS AHM |
| | | | Daily Total | 165 Days | G. Total | Rs 25,333-00 ~~25486-00~~ | |
| | | | 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.

| | Rs. | P. |
|---|---|---|
| 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 | | |

Sheet-I

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 751 (From 1/8/09 To 16/8/09)

Circle No. XII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 708

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 |
|---|---|---|---|---|---|---|---|
| 6 | Sh. Vicky s/o Vijay Pal 1/11 Bapu Dham N. Delhi | S.K | | 42 days 15+14 12 days | do | 6349-00 1842-00 | VKD Sig Attd |
| 7 | Smt Geeta w/o Suresh 21/615 Kalyanpuri N. Delhi | " | | 11 days | do | Paid 1689-00 | गीता Sig Attd |
| 8 | Sh. Kamal s/o Khushi Ram D-279 Moti Bagh I N. Delhi | " | | 13 days | do | Paid 1996-00 | कमल कुमार Sig Attd |
| 9 | Smt Kirshna w/o Yadchand 279 Moti Bagh I N. Delhi | " | | 13 days | do | Paid 1996-00 | कृष्णा Sig Attd |
| 10 | Smt Omvati Vijaypal T-2637 Gali No. 8A Baljeet Nagar N. Delhi | " | | 12 days | do | Paid 1842-00 | ओमवती Sig Attd |
| | | | Daily Total | 103 Days | G. Total | Rs 15,814-00 ~~9365-00~~ 15967-00 | |
| | | | 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.

| | Rs. | P. |
|---|---|---|
| Grand Total of this Muster Roll ... ... ... ... ... | | |
| Deduct-Payment made, as per details transferred to Register of Unpaid Wages | | |
| Total amount paid (in words) Rupees | | |

O.O. No:- D/203/CMO/HQ Dt 18/5/09.

(91) daily wager S/K, L/B @ 151+CA per day

(143) Sheet-4.

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 751 (From 1/8/09 To 16/8/09)

Circle No. XII Voucher No. ........ Dated ........

In continuation of Muster Roll No. 702

Accountant (HG). CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

| S.No. | Name, Father's/Husband's Name & Address grouped according to classes | Designation | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17–31 | Total | Rate Rs. P. (151+CA 26) | Amount Rs. P. | Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Sh. Sohu s/o Kartar Singh, Gj-11 Pali Ka Dham Balmukt N. Delhi | S.K | A | S | P | P | P | P | A | P | S | P | P | P | P | P | P | S | | 11 days | do | 1689-00 (Paid) | [thumb impression] L.T.I Attested |
| 2 | Smt Vidhya w/o Jagnanth, B-70 N Ranjeet Nagar N. Delhi | " | A | S | A | A | A | A | A | S | A | A | A | A | A | A | A | A | | Nill | do | Nil | |
| 3 | Sh. Sonu s/o Iswar, Hut No 35 P Block Sultanpuri N. Delhi | " | P | S | P | P | A | A | P | P | S | P | P | A | A | A | H | S | | ~~8 days~~ 7 Days | do | ~~1228-00~~ 1075-00 (Paid) | [signature] S/S Attested |
| 4 | Ravi s/o Roshan Lal, 10/80 Trilok Puri N. Delhi | " | P | S | P | A | P | P | P | P | S | P | A | P | P | P | P | S | | 11 days | do | 1689-00 (Paid) | [signature] S/S Attested |
| 5 | Sh. Nitan s/o Naresh, 237 Phesh I Mangal Puri N. Delhi | " | P | S | P | P | P | P | P | P | S | P | P | P | P | P | H | S | | 13 days | do | 1996-00 (Paid) | [signature] S/S Attested |
| | | | | | | | | | | | | | | | | | | | | 42 Days | | 6449-00 | |
| | Daily Total | | 3 | 5 | 4 | 3 | 3 | 3 | 3 | 4 | 5 | 4 | 3 | 3 | 3 | 4 | S | | | | G. Total | ~~6602-00~~ | |
| | Initials of person marking the daily attendance | | [initials] | | | | | | | | | | | | | | | | | | | | |
| | Initials of Inspecting Officer | | | | [initials] | | | | | | | | | | | [initials] | | | | | | | |

Pay Rs. .................... (Rupees ........................................)

Grand Total of this Muster Roll ... ... ... ... ... | Rs. | P. |

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.

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

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