ANNEXURE V

Monthly Employment data to be sent to PO by the GP & other Implementing Agency (See Para 10(9))

Financial Year Month Name of the Implementing Agency

Name of the GP **Name of the District** Name of the Block

Sl	Name	Code	Date of	Man da	ys gene	rated		,	Total Exp	enditure (Rs			Must	er	Date of	Remarks
No	of the	Number	Starting										roll	l	sending	
	Project												numb	ers	the	
													use	d	copy of	
				Unskilled	Semi	Skilled	Unckilled	Other	Material	Contingency	Worksite	Total	From	То	Muster	
					skilled		Wages	wages		Contingency	facilities	1 Otai	110111	10	Rolls	
					SKIIICU		w ages	wages			raciiities				to GP	
															(if IA	
															other	
															than	
															GP)	
					·										•	

Signature of the competent authority of the Implementing Agency/GP

ANNEXURE VI

	Muster Roll Number									
To be filled by PO										

Muster Roll for payment of Wages & Traveling Allowance under NREGA

(See Para 10(8))

Name	of the District	Name of	the Block			Na	me of the reg	istering Gra	am Panchay	/at	
Schem	e Number	Name of the sche	me								
Measurement Book # / Measurement Sheet#		Pages from			to						
SI.		ration r & by	ther ite is 5 Kms. 'No)	No. of	SD/	Rate	Amo	ount paid (I	Rs)	Signature/ LTI	Identified
No.	Name	Registration Number & by no	Whether worksite is beyond 5 Kms. (Yes/No)	Total No. of days	SUSS/US	Wage Rate	Wages	TA	Total	of person	by

Paid by me Sign of person paying Signature Secretary of GUS / BC Signature SAE / Nirman Sahayak Adjusted
Signature
Competent authority of Implementing Agency/GP

Annexure-VII

Muster Roll Stock Register to be maintained by the Issuing Authority i.e. Programme Officer at the Block Level

(See Para 32(5))

Issue side

Financial year

Name of The District

Name of The Block

Sl.	Sl. Name of Agency		Data of Issue	Muster Ro	ll numbers	Sch	eme for which issued	Administrative /Financial	Name, Designation and Signature of the Official	
No.	Name of Agency	Date of Issue	From	То	Code	Name	Sanction issued (yes/no)	receiving	Signature of the Official Issuing.	
1	2	3	4	5	6	7	8	9	10	

Each page should be authenticated Muster Rolls to be issued serially

Unused muster rolls, if any, to be cancelled by the IA and kept with the other used muster rolls

Receipt Side

Sl.No	Source of	Order No	Challan No. by	From	To	Name, Designation and Signature
	Receipt	and date	which supplied			of the Official receiving

The muster rolls should be counted properly and tallied for any missing/duplicate numbers

Annexure-VIIA

Muster Roll Receipt and Issue Register to be maintained by Gram Panchayats (See Para 32(5))

	Muster Roll No.		Work for which issued		Administrative/F	inancial Sanction	When Executing Agency is GP				
Sl. No.	From	То	Number	Name	Amount (In Rs.)	No and Date	Date of Receipt of Muster Rolls from Programme Officer	Name, Designation and Signature of the Official receiving Muster Roll	Date of Issue of Muster Roll by G P	Name, Designation and Signature of the Official to whom Muster Roll issued	
1	2	3	4	5	6	7	8	9	10	11	

	When Executi	ng Agency is GP		E	xecuting Agencies other	than the Gram Panchaya	ıt
Date of Return of paid Muster Rolls	Signature of the Official receiving Muster Roll	Date of Entry in the Employment Register	Signature of the Official entering	Date of receipt of Duplicate copy of Muster Rolls	Signature of the Official receiving Muster Roll	Date of Entry in the Employment Register	Signature of the Official entering
12	13	14	15	16	17	18	19

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Sl. No.

Muster Roll No.

Work for

which issued

From

To

Number

Name

Officer

by IA

Date of Receipt of Muster Rolls from Programme

Name, Designation and Signature of the Official receiving Muster Roll

Date of Issue of Muster Roll

Name, Designation and Signature of the Official to whom Muster Roll issued

Date of Return of paid

Signature of the Official receiving Muster Roll

Letter no Date of dispatch of Emp summary and duplicate copies of Muster Rolls to

Signature of the Official dispatching duplicate copies

Muster Rolls

GP and PO

of Muster Rolls

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13

15

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Measurement Book Stock Register to be maintained by the Issuing Authority i.e. Programme Officer at the Block Level

(See Para 33)

Issue side

Financial year Name of The District

Name of The Block

Sl. No.	Name of Agency		ement Book Imbers	Scheme f	or which issued	Date of Issue	Name, Designation and	Name, Designation and
		From	То	Number	Name		Signature of the Official receiving	
1	2	3	4	5	6	9	10	11

Each page should be authenticated Muster Rolls to be issued serially Unused muster rolls, if any, to be cancelled by the IA and kept with the other used muster rolls

Receipt Side

Sl.No	Source of	Order No	Challan No. by	MB From	To	Name, Designation and Signature
	Receipt	and date	which supplied	No		of the Official receiving

The MBs should be counted properly and tallied for any missing/duplicate numbers

Annexure VIIIA

MB Receipt and Issue Register to be maintained by Gram Panchayats/IAs

(See Para 33)

Sl. No.	MB No.		Work for which issued			Name, Designation and		Name,	
	From	То	Number	Name	Date of Receipt of MBs from Programme Officer	Signature of the Official receiving Muster Roll	Date of Issue of MBs by GP/IAs	Designation and Signature of the Official to whom MB issued	
1	2	3	4	5	6	7	8	9	