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कार्यपालक आभयन्ता आमीण कार्य विभाग कार्ग प्रमंडल, हरनौत

## Sch. XLV - Form No. 134

	DIVISION
	SUB-DIVISION

## Measurement Book

No.

Name of Officer	
Date of first entry	
Date of last entry	

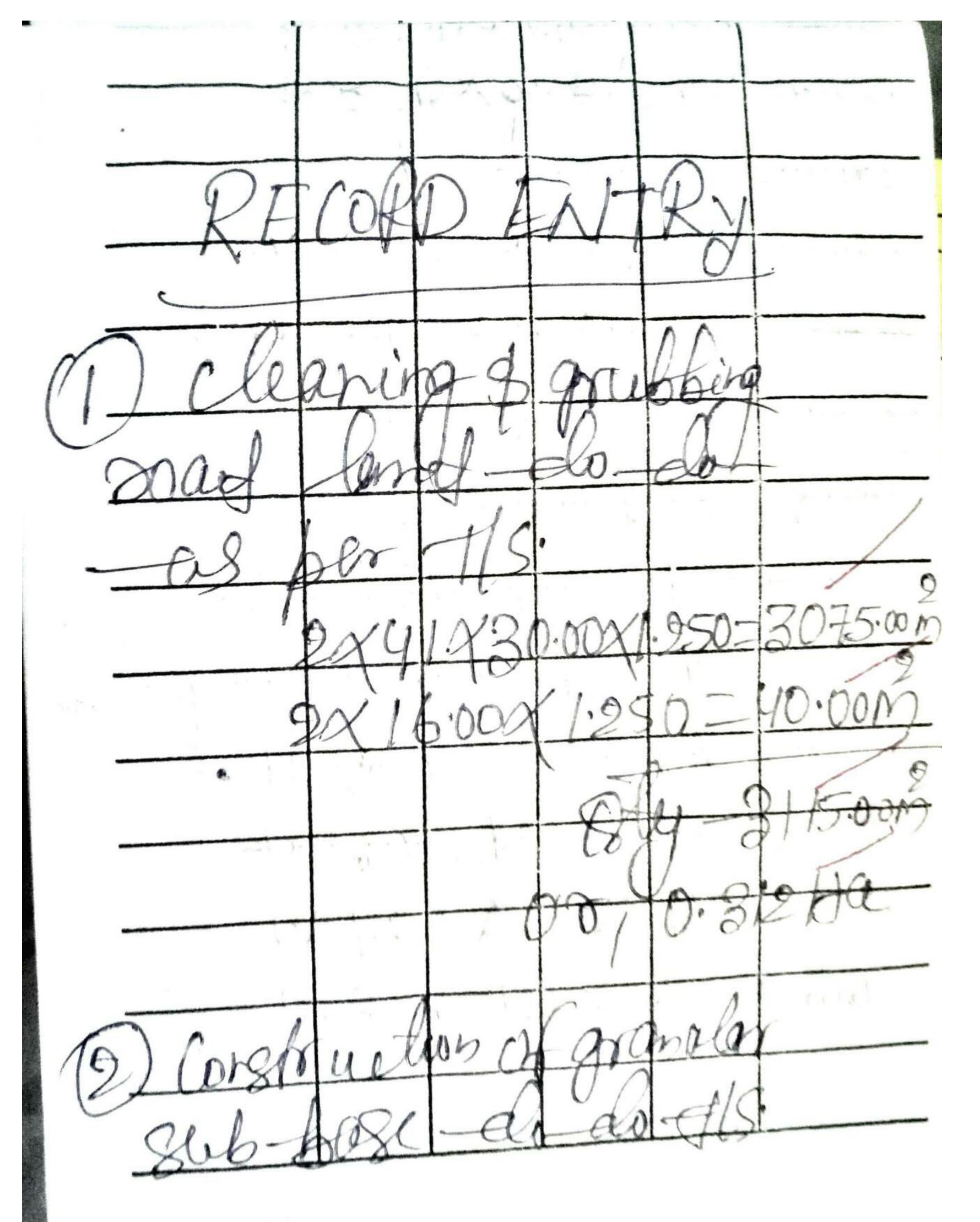
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Name of Work– Situation of Work– Agency by which work is executed– Date of Measurement– No. and date of agreement

(These four lines should be repeated at the commencement of the measurement relating to each work)

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Sch. XLV-Form No. 134

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