

## Guru Gobind Singh Indraprastha University {an autonomous body under Govt. of NCT of Delhi} Sector-16C, Dwarka, Delhi-78

## FULLY VOUCHED CONTINGENT BILL

|                       | {For reimbursement newspaper/magazine charges} [Separate bills will be submitted in quarterly basis] |
|-----------------------|--|
| Department/Office of: | {V.C.Sectt./Registrar/COF/COE/Director/Deans of University Schools etc}                              |
| For the month of :    | 201  |

| S.No. of<br>sub-<br>vouchers | Description | Bill No. & date supporting the Description | Amount<br>Rs. | For Use Of Accounts Deptt.  Amt. restricted to Rs. as per entitlement |
|------------------------------|-------------|--|---------------|---|
| (a)                          | (b)         | (c)  | (d)           | (f)   |
| 1                            |             |  |               |   |
| 2                            |             |  |               |   |
| 3                            |             |  |               |   |
| 4                            |             |  |               |   |
| (In words) Ru                | upees only. | Total                                      |               |   |

### # mention whichever is applicable

#### Certified that:-

- 1. I certify that I am entitled for re-imbursement of *newspaper/magazine* charges as per entitlement.
- 2. I certify that in accordance to my entitlement as indicated in S.No1, I am availing the facility on post-paid basis from the service provider as stated in the bill above.
- 3. I certify that the expenditure included in this bill could not, with due regard to the interest of public service, be avoided.
- 4. I certify that to the best of my knowledge & belief, the payments entered in this bill have been duly made of the parties entitled to receive them and relevant sub-vouchers viz. paid bill raised by the vendor and the receipt obtained thereof have been annexed.
- 5. I certify that the sub-vouchers have been verified/counter-signed by me, being the recipient of the said allowance.
- 6. I certify that the sub-vouchers which have been paid by me and the same may be reimbursed.
- 7. I also certify that the monetary limits prescribed by the GGSIPU i.r.o. newspaper/magazine \*have not been exceeded/have been exceeded but the reimbursement be restricted to the monetary limit for which I am entitled.

Name & signature of the entitled officer with office stamp.

Accounts Asstt./Accountant

(Note:- Bills i.r.o. V.C.Sectt. there is no financial limit for 1 to 4 above & receipts thereof will be verified/countersigned by OSD to VC or P.S. to V.C is acceptable.)

# FOR USE IN FINANCE & ACCOUNTS DEPARTMENT

I have checked the bill w.r.t. to the sub-vouchers and the same is found in order. The officer who has raised the bill is entitled for an amount as at col. (f) above  $\{no\ limit\ in\ case\ of\ V.C.\ Sectt.\}$ 

Vetted w.r.t. standing orders. Expenditure may be sanctioned and the attached voucher Rs. . . . . . . . be passed.

Asstt. Accounts Officer (Pre-Check)

Expenditure Sanctioned and the Bill/voucher passed for payment.

Amount paid/reimbursed in cash/bank transfer

Finance Officer DDO Cashier

<sup>\*</sup>strike out whichever is not applicable.