



आईसीएमआर- राष्ट्रीय पर्यावरणीय स्वास्थ्य अनुसंधान संस्थान
ICMR-NATIONAL INSTITUTE FOR RESEARCH IN ENVIRONMENTAL HEALTH
भारतीय आयुर्विज्ञान अनुसंधान परिषद
INDIAN COUNCIL OF MEDICAL RESEARCH
कमला नेहरू चिकित्सालय भवन, भोपाल
Kamla Nehru Hospital Building, Bhopal - 462001

ADJUSTMENT BILL

The Director
ICMR-NIREH
Bhopal

Voucher No. of 201..
Name of Head of Account.....

A sum of Rs..... was taken as advance on by Shri/Mrs. Dr.
..... Out of this advance, a sum of Rs. has been spent as per the following
vouchers/bills (enclosed).

Voucher No. /Bill No. & date	Name of firm	Items purchased	Amount	
			Rs.	Ps.

(i) The unspent amount of Rs. has been deposited in the Finance and Accounts
Department vide Receipt No/Cheque No..... dated

(ii) An additional amount of Rs. has been spent by Shri/Mrs. Dr. on the
purchase of above items. The amount may please be reimbursed to Shri/Mrs. Dr.....
and charged to the Budget Grant for the year 201..... under Budget
Head.....

Signature
Name

Forwarded by concerned HoD
Date:

(for use of Finance & Accounts Department)

Passed for adjustment/payment of Rs. (Rupees..... To, Shri/Mrs. Dr.....	Head of Account		Head of Account	
	Debit.....	A/c Rs.	Credit Advance Rs.	
	Debit.....	A/c Rs.	Credit Bank Rs.	
	Total Rs.	Paid in cash/by cheque No./PFMS Voucher No. dated	Total Rs.	

Date: Dealing Assistant

Section Officer

Director

DDO/Accounts Officer

Contd...2/-

Particulars to be filled in by the office of the office of Head of Section/Department/Branch/Division while submitting the adjustment bill.

1. Certified that purchase of..... no. of@ Rs.
each was approved by the Director, ICMR-NIREH, Bhopal vide officer order/notes at page..... of
File No..... (please enclose a copy).
2. Certified that the articles has been purchased after calling quotations/as per GFR Rules, 2017 and the purchase bills for have been received in good conditions and according to the specifications mentioned in the supply order/purchase requisitions, their quantities are correct and good quality. The rates paid are not in excess of the accepted market rates and that suitable notes of payment have been recorded against the indents and invoices concerned to prevent double payment.
3. Certified that all the overhead charges i.e loading/packing, sales tax/GST etc. as claimed by the supplier are in accordance with their quotation/bill/invoice as accepted and these have not been paid separately.
4. Certified that the officer who has signed the vouchers attached to the bill is duly authorized to do so.
5. Certified that freight and other charges mentioned in the bill have been verified and found to be correct.
6. Certified that that the rates of sales tax/gst/vat charged by the firm have been verified and are correct and that the goods in question are not such as have been exempted under GST/VAT/Sales Tax.
7. Certified that the expenditure included in this bill could not, with due regard to the interest of the Institute be avoided. Sub vouchers for all sums are attached to this bill.
8. Certified that all the articles detailed in sub vouchers attached to have been accounted for in the respective stock register and wherever required in the asset register..
9. The balance under the head of expenditure is Rs.....according to the books of account of the Institute before payment of the bills under reference.
10. Certified that the amount is actually due and that it has not been claimed earlier.

Date:

Head of concerned department/Branch/Division