

OFFICE OF THE \_\_\_\_\_  
**CODED PROFORMA FOR EXPENDITURE OF \_\_\_\_\_ DEPARTMENT**

Schedule Serial No. (Optional)								Dated: _____/_____/20_____.		
Project ID/No:										
Cost Centers				<b>Detail of Budget Allotment and Expenditure</b>						
ADP No.				Allotment for the Year 20_____						
Name of the Project				Total Exp: 20_____						
WBS Element		(Work breakdown Structure)		Expenditure of this Bill						
Detail Function (Optional)				Balance of Budget						
Grant No. (For Normal Exp:)				Optional						
Posted vide Document Number-				Dated				Item No. _____ For _____		
								P.W.Deposit (Refund)		
								V. No. _____ Dated _____		
				Gross Expenditure		Deductions				
S. No	Cheque No.	Date	Name of Payee / Contractor	Detail Object	Amount (A) Payments	Nature	Detail Object	Amount (B) Deductions	Cheque Amount	
1			ABC	A12470		10% Dep:	G10113	-		
							IT	G12714		
							TQT	G06503		
							KLC	G12146	-	
							GST	G12777	-	
							A. Fee	B03079		
							Stmp Duty	B02731		
							E. Cess	B03021		
							S. Stock	C03802		
			<b>Grand Total</b>		-		Total	-		

Sig: of Accounts Officer/District Accounts Officer  
 With Name Stamp

Sig: of the Divisional Accounts Officer  
 With Name Stamp

Sig: of the DDO of the Department  
 With Name Stamp