

Payment Form

Central University of Tamil Nadu
Thiruvarur – 610 005.

Department / Section / Cell : _____
Sanction order number : _____
Sanctioned amount (A) : _____
Total claim in this payment form (B) : _____
Balance payment, if any to submit (A-B) : _____
Excess payment, if any claimed (if B>A): _____
(if invoice value exceeded the sanctioned amount or prior sanction is not obtained; provide justification for excess expenditure)

Details of Invoice :

Invoice No. / Date	Description	Amount
TOTAL		

(Provide separate enclosure if number of bills/invoices are more than one)

- Made necessary stock entry against each item in the bill/invoice and certified in the invoice/bill.

Encl: (strike whichever is not applicable)

1. List of Bills/Invoices if No. of bills more than one
2. Certified original Invoice/bills
3. Certified installation Certificate, if any
4. Certified warranty Certificate, if any
5. Certificates as per GFR, if any
6. Copy of Sanction order / approval

Signature of claimant

Comments/Recommendation of Dean / Head of Dept. / Section Head (as applicable) and forwarded to Purchase section /Account's section

Head

Dean/Registrar

Print back and back

(for Purchase & Stores use only)

Verified

- Sanction order Number
- Necessary stock entry made in University Register
- Performance Security has been received and is with Purchase or transferred to Finance Section (ION No.) _____ dt. _____
- EMD returned for all the vendors who participated in the Tender

Enclosed

- Copy of note sheet – approval for this indent
- Copy of PO
- Copy of Warranty Certificate
- Bank Account Details Enclosed

Performance Guarantee details _____

Payment Clause (Full payment or part payment) _____

If part payment, probable date of remaining payment:

LDC/UDC

Assistant/SO

Officer in charge

For Accounts Section only

Sanction Accorded : _____

Already paid against sanction: _____

Now Processed : _____

Verified bills/invoices are as per approval and PO/WO and found in order.

Passed for payment of Rs. _____ to _____

under head of account _____

UDC/LDC

SO

AR

FO

Payment Transaction details:

Payment advice sent to _____