FORM M.T.R. 1

[See Rule 34 of M.T.R]
(Obverse)

Certificate of Transfer of Charge

Certified that we have in the **forenoon / afternoon** of this day respectively made over and received charge of the office of **……**

in pursuance of order No. ……., dated **…….**

Signature of Relieved Government Officer
Designation……..

Station……..
Date…… 20……

Signature of Relieving Government Officer
Designation……

Memo of the balances for which responsibility is accepted by the Officer receiving charge:

- Cash Balances (As per Cash Book)
- Stamps in double locks
- Permanent Advance, if any.
- No. of sealed bags said to contain cash and/or other valuables as per register kept.
- Packets containing duplicate keys of padlocks of Banks and Government Officers
- Cheque Forms
- Computer
- Hardware
- Details of outstanding adjustment of Advance drawals, if any.

Station……

Date…… 20 …..

Relieving Officer
Government Officer

Relieved Officer
Government Officer

Note:- This form will also be used by Treasury Officer besides Collector and Sub-Divisional Officer-in-charge of a Treasury.

FORM M.T.R. 2

[See Rule 121 of M.T.R.]

Register of Advice of Cash Orders Issued by Treasury during

No. of Order	Place of Issue	Amount		To Whom Payable	Date of Credit	Date of Payment	Remarks
		Rs.	P				

FORM M.T.R 3

[See Rule 52(i) & 52-A of M.T.R]

Cash Book

Office of…….. **Month of …….**

Receipts **Payments**

Date	No. of receipt where necessary	Particulars	Pay		Allowances		Contingencies				Miscellaneous		Total		Classification
							In recoupment of permanent advance		Advance payment						
			Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	

Date	Sub-vouchers Nos.	Particulars	Pay		Allowances		Contingencies				Miscellaneous		Total		Classification
							Out of permanence advance		Out of money drawn						
			Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	

FORM M.T.R. 4

[See Rule 55(3), 62, 243, 250 & 251 of M.T.R.]
(Observe)

Challan No.

GRN:	**TREASURY RECEIPT NO:**	**Date:**
Department		
Type of Payment		
DDO Code / Designation		
Treasury		
Period		
Deposited By		
Remarks		

Account Head Details	**Amount (Rs).**
Total	
Amount in Words:	

SBI/ Paona Payment Challan			
Payment Details		**FOR USE IN RECEIVING BANK**	
[ ] Cheque-DD Detail		**Ref. No.**	
Cheque/DD No.		Bank Date	
Name of Bank/Branch:			
[ ] Cash			
500x__200x__100x__50x__20x__10x__5x___x__1x__.P__			

This challan shall be valid for a period of 14 days and shall not be valid after……..

In case of challans generated during the month of March, validity shall be restricted up to 31st March only, irrespective of the 14-day period.

FORM M.T.R- 5

[See Rule 51, 56 & 70 of M.T.R]

Receipt Form

Counterfoil 20 No. Received From Address With letter No. Dated, 20 The sum of rupees In cash …….on account of By cheque In payment of Rs. Initial Designation	Counterfoil 20 No. Received from With letter No. dated 20 The sum of rupees In cash …….on account of By cheque In payment of Rs. Initials Designation

FORM M.T.R. 6

[See Rule 141-C of MTR]

Form of Bond or Indemnity for drawing arrears of Pay and Allowances or Pensions of deceased Government Servants or Pensioners

KNOW ALL MEN BY THESE PRESENTS that I,

(a) , widow/ husband/son/daughter of Shri/Shrimati

(b) residing at (c) (hereinafter called residing at "the Obligor") which expression shall unless excluded by or repugnant to the context include his/her heirs, executors, administrators and legal representative and I/we (1) (d) son of resident of and (2) (e) son of resident of

, Surety/Sureties on behalf of the Obligor' (hereinafter called "the Surety"/"the Sureties;" which expression shall unless excluded by or repugnant to the context include his/their heirs, executors, administrators and legal representatives) bind ourselves jointly and severally to pay to the President of India (hereafter called "the Government" which expression shall unless excluded by or repugnant to the context include his successors and assigns) on demand and without a demur a sum of Rs.
(f) (Rupees) for which payment well and truly to' be made we bind ourselves firmly by these presents.
Dated this day of 20.

WHEREAS the aforesaid Shri/Shrimati

(b) was at the time of his/her death in the employment of/receiving a pension of Rs. From the Government.

AND WHEREAS the said Shri/Shrimati (b)

died on the day of 20
and there was due to him/her the sum of Rs. (f)
(Rupees) for pay and allowances in respect of his/her said employment/in respect of his/her said pension.

FORM M.T.R 6 —Contd.

AND WHEREAS the above bounden Obligor

(a) claims to be entitled to the said sum as heir of her/his husband/wife/father, the said Shri/Shrimati

(b) , but has not obtained letters of administration of or a succession certificate to the property and effects of Shri/Shrimati

(b) .

AND WHEREAS the Obligor has satisfied the Government that she/he is entitled to the aforesaid sum and that it would cause undue delay and hardship if she/he were required to produce letters of administration of or a succession certificate to the property and effects of the said Shri/Shrimati
(b)

AND WHEREAS the Government desire to pay the said sum to the Obligor but under Government rules and orders it is necessary that she/ he should first execute a bond with one surety/two sureties to indemnify against all claims to the amount so due to the said shri/Shrimati

(b) before the said sum can be paid to the' Obligor.

NOW THE CONDITION of this bond is such that if after payment has been made to the Obligor, the Obligor or the Surety/Sureties shall in the event of a claim being made by any other person against the Government with respect to the aforesaid sum of Rs. (f)

(Rupees) refund to the Government, the sum of Rs. (f)

(Rupees) and shall otherwise indemnify and save Government harmless from all liability in respect of the aforesaid sum and all costs incurred in consequence of any claim thereto THEN the above written bond or obligation shall be void but otherwise the said bond shall remain in full force effect and virtue.

IN WITNESS WHEREOF the parties hereto have hereunto set their respective hands the day and the year first above written.

Signed by the above named
- _____ Surety/Sureties in the presence of

Signed by the above named
Obligor in the presence of-

(1) •• witness(1)
(2) ••• (2)

Accepted for and on behalf of the President of India by @ in the presence of @ @

FORM M.T.R 6 - Concld.

Note:-

(a) Full name of the claimant.
(b) Name of the deceased Government Servant/Pensioner.
(c) Full address and place of residence of the claimant.
(d) First Surety.
(e) Second Surety.
(f) Amount of the claim.
• Signature of the Obligor.
•• Signature of the First Surety.
••• Signature of the Second Surety.

@ Name and designation of the officer directed or authorised, in pursuance of Article 299 (1) of the Constitution, to accept the bond for ~d on behalf of the President.

@@ Name and designation of witness.

Non. -The Obligor as well as the Sureties should have attained majority 10 that the bond may have legal effect or force.

FORM M.T.R. 7

[See Rule 133(1) of M.T.R]

Form of Bond of Indemnity for drawing Pay, Pensions, Annuities, etc.

THIS INDENTURE made the day of two thousand and …… and between ……

(1)
(2)
(3)

carrying on business in partnership under the style or firm of or

incorporated under the Companies Act and having their registered office at (hereinafter referred to as the $\frac{firm}{company}$ which expression shall where the context admits be deemed to include their ***executors and administrators or representatives*** *and* their successors in business under the same or any other style or name) of the one part and the Governor of Manipur (hereinafter referred to as the Governor of Manipur of the other part.

WHEREAS the $\frac{firm}{company}$ have been in the habit of receiving on account of their customers pay, pensions, annuities, allowances or other payments from funds administered by or on behalf of the Governor of Manipur, including pensions payable on the behalf of other Governments from the $\frac{various\ officials\ whose\ duty\ it\ is\ to\ disburse\ such\ payments}{Accountant\ General\ of\ \ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots\ldots}$ upon the production at the time of such payment of a certificate to the effect that the person on whose behalf such payment was claimed was then alive and in the case of a pensioner also of a certificate of non-employment according to prescribed rules.

AND WHEREAS in order to save time and expense in obtaining payment of such sums the Governor of Manipur has agreed to allow such payments to be from time to time made as they fall due without requiring the production of the said certificates save a certificate of non-employment according to prescribed rules signed by a representative of the $\frac{firm}{company}$ upon being indemnified by the $\frac{firm}{company}$ against any loss by reason of such payments as aforesaid on account of any person who may at the date of such payment be deceased and upon the $\frac{firm}{company}$ entering into such an agreement as is hereinafter contained which the $\frac{firm}{company}$ has agreed to do.

NOW THIS INDENTURE WITNESSETH that in pursuance of the said agreement and in consideration of the premises the $\frac{firms}{company}$ for themselves and their successors hereby covenant with the Governor of Manipur that so long as the Governor of Manipur shall allow such payments as aforesaid to be made without requiring the production of the certificate hereinbefore referred to subject nevertheless as hereinafter provided the $\frac{firm}{company}$ will within seven days from the time when they shall have received notice of the death of any customer for the receipt of or on whose behalf the $\frac{firm}{company}$ may have received any such payments as aforesaid communicate the date of such death to the official for the time being responsible for the payments to such deceased person and further that the $\frac{firm}{company}$ will immediately after the expiration of the said period of seven days repay and refund to Governor of

Manipur so much of any money which may have been received from $\frac{such\ distursing\ official}{Accountant\ General}$ as aforesaid on behalf of such deceased customer as aforesaid as shall be in excess of the amount of the

pay, pension, annuity, allowance or other payments as the case may be to which such deceased customer was entitled up to the date of his decease.

AND ALSO that if and whenever any change in the constitution of the **firm** shall happen whether by the death or retirement of any member thereof or the introduction or accession of a new member or members thereof or otherwise howsoever the **firm** will on every such occasion within 7 days after the change shall have occurred give notice in writing to the Governor of Manipur of the same having happened with full particulars hereof including the full name or names of any new member or members so introduced as aforesaid in every case where any such introduction has taken place will as soon as may be hereafter on being so required by the Governor of Manipur procure the new member or members introduced to enter into a fresh Bond in the same form as these presents either alone or jointly with all the original or remaining members of the **firm**;

PROVIDED ALWAYS AND IT IS HEREBY AGREED AND DECLARED that the arrangement hereby made shall not be determined except by express notice in that behalf given as next hereinafter provided.

PROVIDED ALWAYS AND IT IS HEREBY FURTHER AGREED AND DECLARED that either the $\frac{firm}{company}$ or the Governor of Manipur shall be entitled to determine the arrangement hereby made on giving to the other 14 days' notice in writing in that behalf and on the expiration of such 14 days this arrangement shall determine and the liability of the $\frac{firm}{company}$ under the covenant herein contained shall cease in respect of any such payments as aforesaid made after that date but nothing herein contained shall be deemed to exonerate to release the $\frac{firm}{company}$ from their liability under the convenant herein contained in respect of any such payments as aforesaid made prior to that date **PROVIDED ALWAYS** and it is hereby further agreed and declared that in the case of pensions the $\frac{firm}{company}$ will according to prescribed rules once in every year furnish to the Governor of Manipur or the $\frac{officials\ responsible\ for\ the\ payment\ of\ such\ pensions}{Accountant\ General}$ a certificate by one of the persons prescribed by the said rules of the life of each pensioner whose pension is paid to the firm and a certificate of non-employment signed by the pensioner himself **AND FURTHER** that nothing herein contained shall be deemed to preclude.

the Governor of Manipur $\frac{any\ of\ the\ said\ official\ whose\ duty\ it\ is\ to\ make\ such\ payment\ as\ aforesaid}{the\ Accountant\ General}$ from requiring the production of certificates in proof of the life of any particular person or persons entitled to receive such payments as aforesaid if the Governor of Manipur or $\frac{such\ official}{the\ Accountant\ General}$ shall deem it necessary nor shall the $\frac{firm}{company}$ arrangement made by these presents be deemed to be thereby terminated.

In witness whereof the said parties have hereunto set their respective hands and seals the day and year first above written.

N.B. — An incorporated firm executing the Bond may delete the words in italics.

FORMS M.T.R. 8

(See Rule 116 (1), 136 & 141 of M.T.R)

Bill No._____

Detailed Pay Bill of $\frac{\textbf{Permanent}}{\textbf{Temporary}}$ **Establishment of the_____**

for the month of_____ 20_____District_____

Space for clarification stamp or manuscript entries of classification to be filled in by Drawing officer. Names of detailed heals and corresponding amounts should be recorded by him in adjacent columns. Major head Minor head Sub-head	Voucher No._____list_____ For_____		
1. Held-over amounts should be entered in red ink in the appropriate columns (3), (4), (5) or (6) as the case may be and ignored in totaling. Leave salary the amount of which is not known should similarly be entered in red ink in column (4) at the same rate of pay if he remained on duty. 2. In the remarks column (15) should be recorded all unusual permanent events such as deaths, retirements, permanent transfers and first appointments which find no place in the increment certificate or absentee statement. 3. When an increment claimed operates to carry a Government servant over an efficiency bar it should be supported by a declaration that the Government servant in question is fit to pass the bar. 4. Names of Government servants in inferior service as well as those mentioned in rule 268 may be omitted from pay bill. 5. A red-lined should be drawn right across the sheet after each section of the establishments and under it the totals of columns (4), (5), and (8) for the section should be shown in red ink. 6. In cases where the amount of leave salary is based on average pay, a separate statement showing the calculations of average pay duly attested by drawing officer should be attached to this bill. 7. The names of men holding posts substantively should be entered in order of seniority as measured by substantive pay drawn and below those will be shown the posts left vacant and the men officiating in vacancies. 8. Officiating pay should be recorded in the section of the bill appropriate to that in which the Government servant officiates and transit pay should be recorded in the same section as that in which the duty pay of the Government servant after transfer is recorded. 9. The following abbreviations should be used in this and all other documents submitted with pay bills_____ Leave on Average pay LAP; " " Average pay LHP; " " Quarter Average Pay. LIP; On other duty OD; Leave salary LS; Conveyance Allowance CA; Under suspension SP; On Foreign Service FS; Vacant Vac.; Post office insurance fund PI; Last pay Certificate LPC; Subsistence Grand Sub-Grant Transit Pay TP 10. In case where any fund deduction are included in pay bill, a separate schedule showing the particulars od deductions relating to each fund should accompany the bill.		Rs.	P.
	Pay of Permanent Estab.		
	Pay of Temporary Estab.		
	Allowances and honoraria		
	House Allowance		
	House-rent Allowance		
	Grain Compensation Allowance		
	Fixed Travelling Allowance		
	TOTAL		
	Deduct		
	General Provident Fund* Post Office insurance fund		
	_____Fund (*Separate Schedule attached*)		
	_____Fund		
	_____Fund		
	House Rent		
	Income tax		
	Recoveries of advances		
	Recoveries of overdrawals		
	Total deductions		
	NET TOTALS		

Admitted Rs.
Objected Rs.

(Space for the use of the Accountant General's Office).

Auditor *Suprintendent* *Gazetted Officer*

*The deduct entries relating to Provident Fund should be posted separately for the sterling and ordinary Branches.

FORMS M.T. R. 8-Contd.

Serial Number Of posts	Section of establishment and Name of Incumbents	Substantive pay personal pay or special pay if any, should also be shown in this column as a separate entry below substantive pay	Leave salary	Addi-tional pay for official-ting	Com-pen-satory Allow-Ance	Other Fixed Allow-Ance	Total	Gene-ral Provi-Dent Fund
1	2	3	4	5	6	7	8	9

*****In respect of subscriber to the Sterling Branch it should be noted on the bill and in the Fund Schedule attached to the Bill that the recoveries relate to the Sterling Branch.

FORMS M.T. R. 8 -Contd.

Post Office Insurance Fund Premia And other Fund Deductions (specify Fund)	Net after Deducting Fund Subscrip-Tions, etc.	Income-Tax	Miscellaneous recoveries (fines, Advance, House-Rent, etc.)	Net Payable	Remarks	Aquittance
10	11	12	13	14	15	16

*****In respect of subscriber to the Sterling Branch it should be noted on the bill and in the Fund Schedule attached to the Bill that the recoveries relate to the Sterling Branch.

FORMS M.T. R. 8 -Contd.

	Total (Column 8)	Rs.	P.	
Deduct - Undisbursed pay as detailed below, *Deduct* - General Provident Fund* (Column 9) *Deduct* - Post Office Insurance Fund premia and other Fund deductions (column 10). *Deduct – Income Tax (column 12)* In adjustment of advances recoverable as detailed in statement (attached) a b Recoveries on account of house – rent etc., as detailed in statement (attached)	**(Column 13)**			1. Received contents and certified that I have satisfied myself that all emoluments included in the bills drawn $\frac{1\text{ month}}{2\text{ months}}$ 3 months previous to this date, with the exception of those detailed below (of which the total has been refunded by deductions from this bill) have been disbursed to the proper persons, and that their acquittances have been taken and filed in my office with receipt stamps duly cancelled for every payment in excess of Rs. 20. 2. Certified that no person in superior service has been absent either on other duty or suspension or with or without leave (except on casual leave) during the month of _____ NOTE: - When an absentee statement accompanies the bill this certificate should be struck out. 3. Certified that no leave has been granted until by reference to the applicant's Service Book, leave accounts and to the leave rules applicable to him. I had satisfied myself that it was admissible and that all grants of leave and departures on pension and other duty and other event which are required under the rules to be so recorded have been recorded in the Service Books and leave accounts under my attestation. 4. Certified that all appointments and substantive promotions and such of the officiating promotions as have to be entered in the Service Book of the persons concerned under my attestation. 5. Certified that all Government servants whose names are omitted from, but for whom pay has been drawn in the bill, have actually been entertained during the month, and that full details of the names of the persons concerned and the emoluments drawn for them working up to the total included in this bill have been duly shown in the office copy and that the emoluments drawn are according to the relevant rules and order. 5A. Certified that all class IV Government servants, Head Constable etc. for whom increments have been claimed in the bill have rendered the required period of approved service entitling them to the increased pay drawn in the bill. 5B. Certified that the pay of all Government Servants below the age 18 years holding the posts in the scale of Rs.30_____35 has been drawn correctly in accordance with the provisions of rule 11 of the Central Civil Services (revision of pay) Rules, 1947 as amended from 1st July, 1955. 6. Certified that no person for whom house-rent allowance has been drawn in this bill has been in occupation of rent-free Government quarters during the period for which the allowance has been drawn. 7. Certified the except in the case of the government servants whose names appear in the appended list and in whose case the appropriate certificate required under rule 269(2) has been furnished, no leave salary for any Government servant drawn in this bill is equal to his actual pay.
Total Deductions				
Net amount required for payement in words Rs.				

*****In respect of subscriber to the Sterling Branch, it should be noted on the bill and in the Fund Schedule attached to the Bill that the recoveries relate to the Sterling Branch.

†One line to be used and the other scored out.

FORMS M.T. R. 8-*concld.*

					8.	Certified that no leave salary for any government Servant (Except the following in whose Service Books note regarding allocation has been recorded) Government, etc., other than the Central (civil) Government.
					9.	Certified that the prescribed certificates have been obtained to the effect that the conditions in Supplementary Rules, 6-A, 6-B, 6-C, 6-D, 7 or 7-B, as the case may be have been fulfilled and placed on record in my office.
					10.	Certified that the Government servants for whom the old rates of pay have been drawn do not fall under the categories of persons mentioned in clauses (i) and (iii) of Rule 3 of the revised Rates of Pay Rules.
					11.	Certified that without the sanction of the Head of the Department no person other than an ex-soldier whose age exceeds 25 years was admitted into the inferior pensionable service after the 8th May, 1940
					12.	Certified that the pay of Military pensioners has been fixed with due regard to the provisions of Article 526(a) Civil Service Regulations and the connected instructions of the Government of India.

Details of Pay of Absentees Refunded

Section of establish-ment	Name of Incumbent	Period	Amount	
			Rs.	P.

*Station*_____ *Signature*_____

Dated _____*20* *Designation of the Drawing Officer* _____

Pay Rs. _____ Rupees _____

_____ as follows :-

In Cash Rs. _____

By Transfer credit to _____

Personal Deposits Rs. _____

IV. – Taxes on Income etc. Rs. _____

XXXIX. – Civil Works Rs. _____

Examined and entered.

Treasury Accountant

Dated 20 . Treasury Officer.

FORM M.T.R. 9

[See Treasury Rule 140 of M.T.R]

MEDICAL CHARGES REIMBURSEMENT BILL

Bill No. | Vouchers No.

Detailed Medical Bill of the Establishment of the…….. …… (specify Head of Office/Department) for the month/s of……..

Head of Account: | Grant No:

Major Head: | Appropriation

Detailed Head: | Group Head

1.

Reimbursement of Medical Expenses					
Sl.No	**Section or Establishment and Name of the incumbent**	**Gross Claim**	**Recovery of Advance**	**Net Amount Payable**	**Remarks**
1	2	3	4	5	6

Net Amount required for payment (in words) Rupees……... …….

2. Certified that I have satisfied myself that the amount included in bills drawn 1st/ 2nd months/3rd months previous to the date with the exception of these detailed below (of which the total amount has been refunded by deduction from this bill) have been disbursed to the Govt. Servants therein named and their receipts taken in the office copies of the bill or in a separate acquaintance roll.

3. Certified that Essential Certificates, receipts etc. are appended.

Contd…….

Appropriation for the year	Rs.
Expenditure (including the bill)	Rs.
Balance	Rs.

Signature of the Drawing Officer

Passed for
Rs……..

Signature of the Controlling Officer

Station:

Date:

Received
Contents

Examined & Entered
Treasury Accountant

Date:

Signature of the Drawing Officer

Pay
Rs……

…….

For Use in the Audit Office

Admitted for Rs. …….
Objected to Rs. …….
Reason for objection ……..

Jr./Sr. Accountant Jt.A.O. Pay and Accounts Officer

FORM M. T. R. 10

(See Rule 116-A of M.T.R)

Periodical Increment Certificate

1. Certified that the Government servants named below have earned the prescribed periodical increments from the date cited in column 6, having been the incumbents of the posts specified for not less than 6 months / 1 year from the date shown in column 5, after deducting periods of absence from duty not counting for increment ; absence on leave without pay etc. Further certified that during the period or periods of leave taken from . . . . . to . . . . . and from . . . . . to . . . . . which have been counted for increment in the case of officiating government servant/servants named below, he/they would have officiated in the post/posts but for his/their proceeding on leave.

2. Certified that the government servant/servants named below has/have earned/will earn periodical increments from the date cited for reason stated in the explanatory memo, attached hereto.

Name of Incumbent	Whether substantive or officiating	Scale of pay of Post	Present pay	Date from Which present Pay is drawn
1	2	3	4	5

Date of Present Increment	Future Pay	Absence from duty not Counting for increment		Leave without pay and in the case of those holding the posts in officiating capacity, all other kinds of leave during which he/they would not have continued to officiate in the posts	
		From	To	From	To
6	7	8	9	10	11

Note 1. – When the increment claimed is the first to carry a Government Servant over an efficiency Bar columns 5, 6 & 7 should be filled up in red ink.

Note 2. – The figure (1) or (2) should be placed against each name according as the certificate (1) of (2) applies. The explanatory memorandum should be submitted in any case in which certificate (2) Applies.

(Signature and Designation of Drawing Officer)

FORM M.T.R. 11

[See Treasury Rule 116 (i) & 137 (i) of M.T.R]

Travelling Allowance Bill

Voucher No. of List of payments For 20

District

Instructions for preparing Travelling Allowance Bills

1. Journeys of different kinds and journeys and halts should not be entered on the same line. Only one kind of allowance should, therefore, be filled in on the same line and its amount carried out separately into the last money column.

2. Permanent travelling, conveyance and horse allowances should be drawn along with the pay of the Government servant and not in Travelling Allowance Bills.

3. Fractions of a kilometer in the total of a bill for any one journey for each person should not be charged for.

4. When the first item of a Travelling Allowance Bill is a halt, the date of commencement of that halt should be stated in the “Remarks” column.

5. If daily allowance is claimed in respect of a road journey, the number of kilometer travelled should be entered in column 14 and the daily allowance in columns 24 to 26.

6. In respect of claims for daily allowance for the journey to the place of temporary duty other than the normal place of duty, the distance between the residence and the normal place of duty should invariably be indicated in the ‘Remarks’ column of the bill.

7. Journey performed beyond Indian territory should be indicated separately and the distance travelled should be stated in each case.

8. When travelling allowance is claimed in respect of a journey to or from a hill station, it should be mentioned in the “Remarks” column whether or not the halt has exceeded ten days.

FORM M.T.R. 11- Contd.

(Space for pre-audit enfacements in respect of bills submitted for pre-audit)

For use in Accountant General Office

Head of Account*	**Admitted for Rs……** **Objected to Rs……..** **Reason for objection :-** ***Senior Accountant*** ***Gazetted Officer***

***To be entered by Drawing Officer and checked in Accountant General's Office.**

FORMS M.T.R. 11 -Contd.

Travelling allowance Bill of the Establishment

Name and designation	Headquarters	Actual pay/ pay at the time of transfer	Particulars of Journey* and halts						Purpose of Journey	Kind of journey i.e. by Road, Boat, Rail (mail or ordinary)	Mileage by Road or Trolly or Boat or actual expenses				
			Departure			Arrival					Means of conveyance	Actual fare paid	No. of kilometres	Rate	Amount
			Station	Date	Hour	Stat	Date	Hour							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
															Rs. P.
													Total		

∗ Travelling by road includes travelling by sea or river in a steam launch or in any vessel other than a steamer and travelling by canal. (The particular kind should be specified.)

† In cases where steamer company has two rates of fares, one inclusive and one exclusive of diet the word “fare” should be held to mean “fare exclusive of diet”.

(a) If there is a combined appropriation for travelling allowance of gazetted & non-gazetted Government servants the combined appropriation and expenditure should be shown in this column.

of……for the month of…… 20……..

Transportation charges of personal effects					Railway/steamer/Air fare				Daily allowance				Total of each line		Remarks	
Details of personal effects					Class in which actually travelled	No. of fares	Amount		No. of days	Rate	Amount					
Weight	Rate	Distance	Amount													
17	18	19	20		21	22	23		24	25	26		27		28	
			Rs.	P			Rs	P			Rs	P	Rs	P		
															(a) Appropriation for 20…..	
															Expen-diture including this bill.	
															BALANCE	

Deduct: undisbursed Travelling Allowance refunded as detailed on the reverse.			
Deduct: Advance of Travelling Allowance on tour/ Transfer adjusted as detailed on the reverse.			
Net sum required payment			

FORMS M.T.R. 11-Contd.

Certificates

1. Certified that I have satisfied myself that the amounts included in bills drawn $\begin{matrix}1\,month\\2\,months*\\3months\end{matrix}$ previous to this date, with the exception of those detailed below (of which the total amount has been refunded by deduction from this bill), have been disbursed to the Government servants therein named and their receipts taken in the office copy of the bill or in a separate acquittance roll.

2. Also that the journeys for which mileage has been claimed under Supplementary Rule 77 for non-gazetted Government servants were made by public or hired conveyance under my orders.

3. Also that it was necessary for the Government servants for whom halting allowance at the headquarters is drawn to keep up the whole or part of their camp equipage during such halt, and that the expense incurred on this account was not less than the halting allowance drawn (Supplementary Rule 91).

Station

Date Head of Office.

@Passed for Rs. _____Rupees_____

Controlling Officer.

_____

Received Contents

Head of Office

_____

Pay Rs. _____ (Rupees_____)

Examined and entered

Accountant *Treasury Officer*

Date Date

Detailed of undisbursed travelling allowance refunded					Details of advance of travelling Allowance on tour transfer adjusted					
Section of establishment	Name	Period	Name of the treasury and date of drawal	Amount	Section of establishment	Name	Period	Name of the treasury and date of original drawal	Amount Adjusted	
									On tour	On transfer
				Rs. P.					Rs. P.	Rs. P.

*One line to be used and the other scored out.

†Clause 2 should be scored out when no mileage is when Supplementary Rule 77 and clause 3 when there is no claim under supplementary rule 91.

@The net amount of the claim in words and figures as will be passed by the controlling Officer should be shown here.

FORM M.T.R. 12

[See Rule 141 (1) of M.T.R]

Acquittance Roll

Acquittance Roll of Permanent (or Temporary) Establishment of the _____ for Pay or Travelling Allowance for the month of _____20 .

Item No.	Name	Designation	Net Amount payable		Dated signature (with stamp where necessary
			Rs.	P.	
					Total Unpaid Rs. ( ) Rupees
		Total			

Passed for Rs. ( ) on the authority of the Establishment

_____ bill of , for Travelling Allowance

Cashier ***Drawing Officer***

Certified that a proper acquittance has been taken in respect of each amount paid in this roll from the person entitled to receive it.

Disbursing Officer

FORM M.T.R. 12-A

(See Note 3 below, Rule 141 of M.T.R)

Bill Register

Bill No. and Date	Particulars of Bills	Net Amount of Bill	Dated initials of Gazetted Officers signing Bill	Date of presentation at Treasury	Token No.	Amount passed by Treasury	Date of Signing acknowledgement with initials of Officer signing Bill	No. and Date of Treasury Voucher and Date of Encashment	No. and Date of Cheque or endorsement	Date of entry in Cash Book	Initials of Gazetted Officer in charge of Cash	Amount disbursed in			No. and Date of Bill in which balance short drawn	Remarks
												Month of Encashment	2nd Month	3rd Month		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
		Rs. P.				Rs. P.						Rs. P.	Rs. P.	Rs. P.		

FORM M.T.R. 13 (C.T.R. 29)

[See Rule 157 of M.T.R]
[See Rule 299 of C.T.R]

Register of Contingent Charges of the Department of the District 20 .

Left hand page

Date	To whom paid Appropriation for each head	No. of Sub-Voucher / Contingent abstract	DETAILED HEADS OF BUDGET										
			Sub-divisions of detailed heads as may be convenient. If the grant be not ordinarily distributed among the sub-divisions of a detailed head, they should be linked by a brace and the amount placed below. Each of these spaces represents amount column.										

Right hand page

DETAILED HEADS	Unusual charges		Total of each contingent abstract	Total of each month's bill	Date of detailed bill	Date of admission with initials	Remarks
Sub-divisions of detailed heads	Description	Amount					
		Rs. P.					

FORM M.T.R. 14

[See Rule 163 & 164 of M.T.R]

Fully-vouched Contingent Bill

No.

District	**Detailed Bill of Contingent charges of** **for the month of 20 .**				**Voucher No.** **of_----- list of payments for** **the month of _____20 .**	
	Head of Account-					
Number of Sub-vouchers	**Description of charge and number and date of authority for all charges requiring special sanction**				**Amount**	
					Rs	**P.**
				Carried over.		

FORM M.T.R. 14 -contd.

Number of Sub-vouchers	Description of charge and number and date of authority for all charges requiring special sanction			Amount	
	Brought forward			**Rs.**	**P.**
	Total Rupees				

(I) I certify that the expenditure included in this bill could not, with due respect to the interest of the public service, be avoided. I certify that to the best of my knowledge and belief, the payments entered in this bill have been duly made to the parties entitled to receive them with the exceptions noted below, which exceed the balance of the permanent advance and will be paid on receipt of the money drawn on this bill, save those noted below, which will be forwarded as soon as the amounts have been paid. I have as far as possible obtained vouchers for other sums and am responsible that they have been so defeated or mutilated that they cannot be used again. All work bills are annexed.

I also certify that the amounts on account of pay and allowances of the class IV
1 month
Government Servants drawn 2 months previous to this date with the exceptions of those detailed
3 months
below of which the total amount has been refunded by deduction from this bill have been disbursed to the Government Servants concerned and their receipts taken.

(2) *Certified that all the articles detailed in the vouchers attached to the bill and in those retained in my office have been accounted for in the Stock Register.

(3) Certified that the purchases billed for have been received in good order, that their quantities are correct and their quality good and according to specifications, that the rate paid are not in excess of the accepted and the market rates and that suitable notes or payment have been recorded against the indents and invoices concerned to prevent double payments.

(4) Certified that—

(a) The expenditure on conveyance hire included in this bill was actually incurred was unavoidable and is within the scheduled scale of charges for the conveyance used, and

(b) The Government Servant concerned is not entitled to draw travelling allowance under the ordinary rules for the journey, and is not granted any compensatory leave and does not and will not receive any special remuneration for the performance of the duty which necessitated the journey.

(5) Certified that the monetary or quantitative limits prescribed by the Government in respect of items of Contingencies included in the bill have not been exceeded.

***This certificate is required when proper store accounts of materials and stores purchased are required to be maintained.**

FORM M.T.R. 14-Concld.

Received contents. . .	**Appropriation for the current year …….** **Expenditure including this bill…….** **Amount of work bills annexed …….** _____ ***Signature and designation of the Drawing Officer***
	Balance available …….

Pay Rupees ( )

Examined

Accountant Treasury, Dated ***Treasury Officer***

Space for Pre-audit enfacements in respect of bills submitted for pre-audit.

For use in Accountant General's Office

Head of Account—

Admitted for Rs.

Objected to Rs.

Reasons of Objection—

Auditor ***Superintendent*** ***Gazetted Officer.***

FORM M.T.R. 15

[See Rule 165 & 166 of M.T.R]

Abstract Contingent Bill

No.

Detailed bill will be sent for countersigned on _____

District	**Bill for contingent charges of**		**Month in which presented for payment at treasury _____20 .**		
	Head of Account—		**Voucher No. of List of payments for 20 .**		
Details of numbers of Sub-vouchers	**Detailed head of charge (with description where necessary) and quotation of authority for charges requiring special sanction**			**Amount**	
				Rs.	**P.**
Carried over.					

N.B.—The Treasury Officer will make payments on this form as often as required; but the drawer should be careful to include in the detailed contingent bill of a month only the amount of all abstracts encashed at the treasury during that month.

FORM M.T.R. 15-Concld.

Details of Nos. of Sub-vouchers	Detailed head of charge (with description where necessary) and quotation of authority for charges requiring special sanction			Amount	
	Brought forward			**Rs.**	**P.**
	Total Rupees ***Deduct*—Amount disallowed by the Controlling Officer in Bill no. dated for Rs.** **Net amount payable.** **(in words)**				

NOTE--- The Government Officer drawing this bill is responsible for having initialled the date of each payment in the Contingent Register. The Register is required to be sent up with bills and sub-vouchers for this purpose.

Appropriation for the current year …….
Expenditure including this bill…….
Amount of work bills annexed ……..……
Balance available_____

Dated

Received contents.

Drawing Officer

Examined and entered. **Pay Rupees ( )**

Accountant ***Treasury*** ***Dated*** ***Treasury Officer***

Space for pre-audit enfacements in respect of bills submitted for pre-audit.

For use in Accountant General's Office

Head of Account--	**Objected in full pending receipt of detailed Contingent Bill and objected to Rs.** **on the following ground:-** **Auditor** **Superintendent** **Gazetted Officer**

FORM M.T.R. 16

[*See* Rule 168, 232 & 314 of MTR]

Detailed Countersigned Contingent Bill

No.

NOTE—Government officers whose bills are *countersigned before payment* by the Controlling Officer should use Form M.T.R. 33.

[Not payable at the Treasury]

Sent to Controlling Officer on 20 .

Countersigned and sent to Accountant General on 20 .

District	**Monthly detailed bill of contingent charges of for the month of 20 .**
	Head of Account—

Details of numbers of Sub-vouchers	**Description of charge and number and date of authority where special sanction is necessary**			**Amount**	
				Rs.	**P.**
		Carried over.			

FORM M.T.R. 16 -Contd.

Details of numbers of Sub-vouchers	Description of charge and number and date of authority where special sanction is necessary	Amount Rs.	Amount P.
	Brought forward		
	Total Rs. ( ) Rupees		

I certify that the expenditure included in this bill could not, with due regard to the interests of the public service, be avoided.

I have satisfied myself that the charges entered in this bill have been really paid. Vouchers for all items of expenditure above Rs. 50 in amount, and all work bills are attached to the bill. I have, as far as possible, obtained vouchers for other sums, and an responsible that they have been so defaced or mutilated that they cannot be used again.

I also certify that the amounts on account of pay and allowances of the Class IV

Government Servants drawn $\frac{\text{1 month}}{\text{2 months}}$ **previous**
$\frac{\text{3months}}{}$

to this date with the exceptions of those detailed below of which the total amount has been refunded by deduction from this bill have been disbursed to the Government servants concerned and their receipts taken.

***2. Certified that all the articles detailed in the vouchers attached to the bill and in those retained in my office have been accounted for in the Stock Register.**

3. Certified that the purchases billed for have been received in good order, that their quantities are correct and that their qualities good and according to specifications, that the rates paid are not in excess of the accepted and the market rates and that suitable notes of payment have been recorded against the indents and invoices concerned to prevent double payments.

4. Certified that: -

(a) the expenditure on conveyance hire included in this bill was actually incurred, was unavailable and is within the scheduled scale of charges for the conveyance used; and

(b) the Government servant concerned is not entitled to draw travelling allowance under the ordinary rules for the journey, and he is not granted any compensatory leave and does not and will

Drawn on abstract
Bill No. dated
Ditto.
Ditto.
Ditto.
Add—Amount of disallowance refunded

Total of this bill

Appropriation for

Expenditure including this Bill……
Amount of work bills annexed

not otherwise receive any special remuneration for the performance of the duty which necessitated the journey.			
5. Certified that the monetary or quantitative limits prescribed by the Government in respect of items of contingencies included in the bill have not been exceeded.			
***This certificate is required when proper store accounts of materials and stores purchased are required to be maintained.**			
Date ***Signature of Drawing Officer.***			
	Balance available.		

For use of Controlling Officer.

Disallowed from Sub-voucher No……

Ditto…….

Ditto……. _____

Passed for Rupees

Total of this bill .

_____

I certify that in support of every charge of more than Rs. 50 made in this bill, a receipt or other voucher has been given to me. The receipts and vouchers for items in excess of Rs. 200 are attached to the bill, and I am responsible that the receipts and vouchers for all other items of more than Rs. 50 are in proper form and order and are in my possession and that they have been so cancelled that they cannot be again used to support claims against the Government. All work bills are also appended.

Date_____ ***Signature of the Countersigning Officer***

FORM M.T.R. 17

[See Rule 172 of M.T.R]

No. _____

NOTE. – This form should be used in the case of bills countersigned by the Controlling officer before payments.

District of	**Detailed Bill of Contingent Charges of For the month of ……20** **Head of Account**	**Voucher No.** **of List of payments for 20 .**				
Number of Sub-vouchers	**Description of charge and number and date of authority for all charges requiring special sanction**				**Amount**	
					Rs.	**P**
		Carried over				

FORM M.T.R. 17 -Contd.

No. of Sub-vouchers	Description of charges and number and date of authority for all charges requiring special sanction	Amount			
	Brought forward			Rs.	p.
	Total (Rs.) Rupees				

1. I certify that the expenditure charged in this bill could not, with due regard to the interest of the public service, be avoided. I certify that to the best of my knowledge and belief, the payments entered in this bill have been duly made to the parties entitled to receive them in the exceptions noted below which exceed the balance of the permanent advance and will be paid on receipt of the money drawn on this bill. Vouchers for all items of expenditure above Ts. 50/- in amount and all work bills are attached to this bill save those noted below, which will be forwarded as soon as the amounts have been paid. I have as far as possible obtained vouchers for other sums and am responsible that they have been defaced or mutilated that they cannot be used again.

I also certify that the amounts on account of pay and allowances of Class IV Government Servants drawn1 month/2 months/ 3 months previous to this date with the exceptions of those detailed below of which the total amount has been refunded by deduction from this bill have been disbursed to the government Servants concerned and their receipts taken.

*2. Certified that all the articles detailed in the vouchers attached to the bill and in those retained in my office have been accounted for in the Stock Register.

3. Certified that the purchases billed for have been received in good order, that their quantities are correct and their quality good and according to specifications, that the rate paid are not I excess of the accepted and the market rates and that suitable notes of payment have been recorded against the indents and invoices concerned to prevent double payments.

4. Certified that:-

(a) the expenditure on conveyance hire included in this bill was actually incurred, was unavoidable and is within the scheduled scale of charges for the conveyances used, and

(b) the Government servant concerned is not entitled to draw travelling allowance under the ordinary rules for the journey and he is not granted any compensatory leave and does not and will not otherwise receive any special remuneration for the performance of the duty which necessitated the journey.

5. Certified that the monetary or quantitative limits prescribed by the Government in respect of items of contingencies included in the bill have not been exceeded.

* This certificate is required when proper store accounts of materials and stores purchased are required to be maintained.

FORM M.T.R. 17 -Concld.

Received contents *Signature and designation of Drawing Officer*	Appropriation of current year Expenditure including this bill Amount of work bills annexed Balance available

For use of Controlling Officer

Passed for Rupees (in words)

I certify that in support of every charge of more than Rs. 50/- made in this bill, a receipt or other voucher has been given to me, and is now in my possession. The receipts and voucher for items in excess of Rs. 200/- are attached to the bill with the exception of those above Rs. 200/- noted above which will be sent after payment; and I am responsible that the receipts and vouchers for al other items of more that Rs. 50/- ae in proper form and order, and that they have been cancelled that they cannot be again used to support claims against the Government. All works bills are also appended.

Dated:…… *Controlling Officer*

Designation

Pay Rupees( )……

Examined and entered.

Accountant Treasury Dated *Treasury Officer*

Space for Pre-audit enfacement in respect of bills submitted for pre-audit.

For use in Accountant General's Office	
Head of account……..	Admitted for Rs……..
	Objected to Rs…….
	Reasons of objection--
	Auditor Superintendent Gazetted Officer

FORM M.T.R. 18

(See Rule 181-A, 184 & 189 of M.T.R)

Register of PPOs

PPO No.		Thumb impression	Photo with family
Specimen Signature: - 1. 2. 3. Identification Mark:			
Name of Pensioner (Block letter)			
Residential Address (Block letter)			
Added from/ Transferred from		Office	
Vide order No. & Date		Post held	
		Pay Scale	
Class of Pension		Qualifying Service	
Bank Account No. if any:			
Special Pension:			
Enhanced Rate:			
Normal Rate:			
Date of Birth	Date of Appointment	Date of Retirement	Date of Death
Average Emoluments	Emoluments for family pension	Emolument for DCRG	Last Pay Drawn
Amount of Pension	Amount of Commutation	Date of Commutation	Amount of DCRG
Commuted value/factor w.e.f.	Rs.	From	Net Pension
Recovery if any:			
Rs.			

Details of Family Members

Sl. No.	Name	Relationship	Date of Birth	Handicapped
1				
2				
3				
4				

Prepared by

Verify by

Signature
Name in Full
Designation Supervisor Sr. Accountant

Treasury Officer
Assistant Treasury Officer

FORM M.T.R. 19

(See Rule 191(1) & (2) of M.T.R)

Pension Bill Form

Below Rupees: -

APPEARED IN PERSON

G.A.S.

41

Officer in charge of Treasury Sub-divisional Treasury Chest.

A.

MEMO – It is requested that this Form may be used for submission of next bill.

No. Pension Payable Order

2071 – Superannuation Allowances and Pension (Central)

Superannuation and Retired Allowances.

Compassionate Allowances.

Gratuities.

Voucher No. ……..

of

List of Payment 200……

Received the amount of Pension due to me the month of 200

as late

Less Subscription to Fund

Less income Tax of paise in the Rupees.

Rs.	P.

+( ) only

Officer in charge Treasury or

Sub-Divisional Treasury Chest

at ……..

the ……200

Total (in words) Rupees ……

I declare that I have not received any remuneration for serving in any capacity either in a Governmental Establishment or any establishment paid from an Incorporated Local Fund. During the period for which the amount of pension claimed in this bill is due

One Rupees REVENUE STAMP required for sum exceeding Rs. 500

Incorporated in Sardar Account The ……. 200…… Examined .....Account

Pensioner **Pensioner**

FOR USE IN AUDIT OFFICER

Admitted

Objected

Auditor Supdt.

Certified that this bill been signed by the pensioner and that Pensioner is alive on this date.

…….. ……..

……20…… ……20……

1. A pensioner specially exempted by the Local Government from personal appearance, a female pensioner not accustomed to appear in public, or a male pensioner who is unable to appear in consequence of bodily illness or infirmity may receive his or her pension upon the production of life-certificate signed by a responsible officer of Government, or by some other well-known, and trustworthy, person.

2. A pensioner of any description, who produces a life-certificate signed by some person exercising, the powers of Magistrate of any class under the Criminal Procedure Code, or by any Registrar or Sub-Registrar under the Registration Act or by any pensioned officer who, before retirement exercised the powers of a Magistrate, or by a chairman or any gazetted officer of any Government or by any person holding, a government tittle, is also exempted from personal appearance.

3. Certified to be given in case of non-attendance in person. In the case of male prisoners not specially exempted by Local Government from personal appearance, if the certificate is not signed by any of the persons mentioned in Direction No. 2 it will be necessary to certify also that the pensioner is too ill to appear in person.

FORM M.T.R. 19-A

[See Note below Rule 176, 191(4), 193-A, 196 & 196-A of M.T.R.]

Bill for withdrawing Death-cum-Retirement Gratuity/Provisional Pension

Head of Account …….. District …….

…… Voucher No. ……of ……

…… List of payments for ……

Name of Gratuitant…….

No. and date of letter of authority
of the A.G. ……

Death-cum-Retirement Gratuity (Gross) ……..	Amount	
	Rs.	P.
Less deduction –		
……		
……		
……		
Total deductions ……		
Net amount payable ……		

Net amount required for payment (in words) Rupees …….
……

Pay Rs. ……
(Rs. ……
……)

Treasury Officer

Examined and entered

Treasury accountant

Signature ……

Designation of the Drawing officer ……
Station ……
Dated ……

Contents received

Pay to ……
Signature of the Drawing Officer ……
……

For use in Accountant General's Office

Admitted for Rs. ……

Objected to Rs. ……

Nature of Objection ……

Auditor Superintendent Gazetted Officer

FORM M.T.R. 20

[See Rule 192 of M.T.R]

Yearly declaration of Female pensioners whose pensions are terminable on their marriage or re-marriage

This certificate is to be attached to the pension bills for December.

Pension Payment Order No. _____

I hereby declare that I am not married, and that I have not been married during past year.

Dated _____ Signature _____

Widow / Daughter of the late _____

To be signed by a Responsible Officer Or well-known person correct. (Concerned SDO)

I certify to the best of my knowledge and belief that the above declaration is

Dated _____ Signature _____

Designation _____

FORM M.T.R. 20-A

[See Rule 193-A of M.T.R]

Family Conversion Form

To

The Treasury/Sub-Treasury Officer ……
Manipur.

Subject: - Request for conversion of Family Pension for PPO..... on expiry of pensioner Shri/Smt ……

Madam/Sir,

I have the honour to submit the following information: -

i).	PPO No.	
ii).	Name of pensioner (expired)	
iii).	Date of expiry/death	
iv).	Address	
v).	Applicant's Name	
vi).	Relation with pensioner	

It is requested to take up necessary action for conversion of family pension in my favour as I am the legal wife/husband of the deceased pensioner. The required documents are enclosed herewith as follows:

Sl. No.	Documents:	Encl. (Y/N):
1.	Death Certificate (Municipality/Govt. Hospital/Registrar of births & deaths)	
2.	Affidavit for claim of family pension (sworn in presence of Oath Commissioner)	
3.	Specimen Signature/Descriptive Roll	
4.	Attested photo-copy of Aadhaar of applicant	
5.	Three passport-sized photographs of applicant duly attested	
6.	No-loan/No-due/No-liability certificate or letter from bank (expired pensioner's a/c	
7.	Photo-copy of bank-passbook of claimant	
8.	Photo-copy of electoral roll of claimant duly attested	
9.	Legal wife/legal husband certificate of applicant issued by concerned SDO	

N.B.: *i). All photo-copies to be attested by Gazetted Officer*

ii). Photo-copy of I-Card of attesting Gazetted officer to be enclosed

iii). In case bank-account of claimant is opened in same branch of expired pensioner, there is no need to submit No-loan/No-due certificate of expired pensioner

Date:…….. Place:…….

Mobile/contact No.: ……..

Yours faithfully,

( )

FORM M.T.R. 20-A

DESCRIPTIVE ROLL AND SPECIMEN SIGNATURE

1. Name of Applicant for family pension……..

   ……..

2. Name of expired pensioner……..

   ……..

Passport photo of applicant attested by gazetted officer

3. PPO No……..

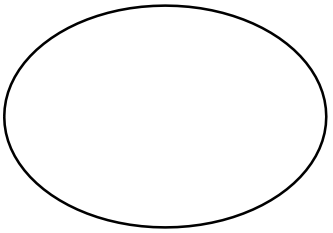
4. Address of applicant…….
   ……

5. Height of applicant……..

6. Identification mark of applicant……..

7. Date of birth of applicant……..

8. Thumb-print of applicant:



9. Specimen-signature of applicant

   (i)…….
   (ii)……
   (iii)……

Certified that the above information/details are true and is attested by me as follows:

……
(*Signature + official seal of gazetted officer*)

FORM M.T.R. 20-A

Family -pensioner Verification Form: ……

The Family-pensioner …… Wife /Husband of …… Holder of PPO ……. has personally appeared in front of me on Date ……..

The identity of the family pensioner has been verified along with the documents submitted in my presence.

Date ……..

(Treasury /Sub -Treasury Officer)

……

FORM T. R. 20-B

[See Rule 193-A of M.T.R]

Intimation regarding death of pensioner who elected the Family

Pension Scheme for Central Government employees, 1964.

From

The Treasury Officer,

……..

To

The Accountant General,

……. Dated, the

Sir,

I am to inform you that Shri/Shrimati .... ,holders of Pension Payment Order No .... who was drawing his/her pension from this Treasury1SubTreasury, died on .....

2. The first payment of family pension @ Rs ..... . (Rupees ..... only) per month has been made to ..... for the period from ..... to ..... in Treasury Voucher No ..... . dated ..... and included in the pension payment schedule for ..... Before making the said payment, the death certificate, the application form and the other documents prescribed in Government of..... Office Memorandum/letter No ..... dated ..... have been obtained from the claimant and accepted after necessary scrutiny. I have also personally satisfied myself about the identity and title of the claimant.

Yours faithfully,

Treasury Officer.

FORM M.T.R. 21

[See Rule 225 of M.T.R]

Bill for Refund of Revenue

REFUNDS OF REVENUE

DISTRICT OF _____

Head of Account — Deduct-REFUNDS (Name of Revenue head)

In whose name credited	On what account received	Amount realized	Date of Payment into Treasury	Amount in which included and head to which credited	Treasury Officer's signature in token of verification of Treasury credit	Name of Payee	Amount to be refunded
1	2	3	4	5	6	7	8
		Rs. P.		Rs. P.			Rs. P.

(1) Certified that this order of refund has been registered and noted against the original receipt entry in the Departmental account under my initials and previous order for refund of the same sum has not been issued.

(2) Passed for payment under sanction given in ……

(3) Sanctioned and passed for payment.

Note: - (2) or (3) to be struck out as required.

Received Payment

Claimant's signature

Date _____

Magistrate or other Officer

Examined Pay Rupees---------- ( )

only. Treasury Accountant Treasury officer

In cases where refunds of fines are permitted to be made direct from treasuries or sub-treasuries other than those at which they were credited, the entry in column 5 should include the name of the treasury or sub-treasury in which the amount was credited and column 6 should be filled up by the Treasury Officer of the district (not sub) Treasury.

For use in Accountant General's Office

Admitted

Objected

Superintendent

FORM M.T.R. 22

[See Rule 226, 229 & 310 of M.T.R]

Grant-in-aid Bill

No.

Head of Account _____

Received the sum of Rs. ( )
being the grant-in-aid for the period _____ sanctioned by _____
in his letter No. _____ dated _____ (copy enclosed).

Signature Designation

Dated _____

Countersigned for Rs. _____ Signature Designation

Dated _____

For use in Treasury

Pay Rs. ( )

Examined Treasury Officer

Treasury Accountant

For use in Accountant General's office

Admitted
Rs. _____ Objected

Auditor Superintendent Gazetted Officer

FORM M.T.R. 23

[See Rule 228 of M.T.R]

Bill for Scholarships tenable at ……..…….…….. College/School,…….……during the month of …….…… 20……..…..

Serial No.	Year of Award	Kind of scholarships or stipend holder	Name of scholarship or stipend holder	Monthly value of scholarships	No. of days for which drawn	Amount drawn	Remarks

Deduct balance undisbursed from last month

Balance due: _____

(In words) _____

I hereby certify that the scholarship or stipend holders, named in this bill, have been regular in attendance, and have conformed to the rules under which their scholarships or stipends are tenable.

Certified also that the scholarships or stipends drawn on the last bill, with the exception of those refunded by deduction, have been paid to the proper person and their receipts taken in acquittance rolls kept in my office.

Received Payment.

Countersigned for Rs. _____

Signature _____

Designation _____ Principal/Manager

Date _____ Date _____ College/School

For use in Treasury Office.

Pay Rs. ( )

Examined Date _____ Treasury Officer

Treasury Accountant.

For use in Accountant General's Office.

Head of Account _____

Admitted Rs. _____

Objected to Rs. _____

Reason of objection _____

Auditor Superintendant Gazetted officer

FORM M.T.R. 24

[See Rule 191(2) of M.T.R]

Bill for pensions chargeable to……. paid at the……..Treasury from…….to…….20……

Payment								
Date	No.	No. of Pension Payment Order	Signature of pensioner to non-employment certificate We declare that we have not received any remuneration for serving in any capacity either in a Government establishment or on establishment paid by a Provincial Government or by a Local Fund during the period for which the amount of pensions claimed in this bill is due.	Name of Pensioner	Monthly Amount	Period of claim	Amount paid	Signature of payee with stamp if payment exceeds Rs. 20. We do hereby acknowledge to have received the amount set against our respective names as pensions due for the periods noted in our respective Pension Payment Orders.

			*We further declare that we have accepted after obtaining/without obtaining the previous sanction of the Governor-General to such acceptance. OR We further declare that we have not accepted any commercial employment.							
					Rs.	P.		Rs.	P.	

•This declaration is required to be given by a pensioner who immediately before retirement was a member of an All-India Service or a Central Service Class I, and who, on or after the 1st January 1948, accepts any commercial employment before the expiry of two years from the date of his retirement, "Commercial employment" for this purpose means employment in any capacity, including that of an agent, under a company, firm or individual engaged in commercial business and includes also directorship of such company and a partnership of such firm. (See Article 531-B Civil Service Regulations.)

NOTE 1.-The non-employment certificate should abo be printed in the Indian language commonly used in the place.

NOTE 2.-In the case of pensioners who furnish particulars of re-employment in the certificate, the disbursing officer should ascertain and report whether the rules regarding such re-employment have been duly observed.

FORM M.T.R. 25

[See Rule 213, 244(2), 246, 247, 252 & 254 of M.T.R]

Works Bills other than gazette Works

Bill No :

Challan Number :

E.P. No, :

Head of Accounts :

DOD code & Office :

Project Name :

Work Order Name :

TAN Number :

Challan Date :

E.P. amount (in Rs) :

E.P. valid up to :

U.O. No :

Beneficiary Name	Voucher No	Reference No	Cross Amount	Deductions													Total deduction	Net Amount
				CGST	SGST	IGST	IT	FR	IT on FR	LC	SD	VAT	Agency charge	Monopoly on FR	INTEREST ON map	VAT on FR	Others	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20

- IT: Income Tax * VAT: Value-added Tax *SGST: State Goods and Services Tax * LC: Labour Cess
- FR: Forest Royalty * SD: Security Deposit * CGST: Central Goods and Services Tax * MAP: Mobilisation Advance Payment
- IGST: Integrated Goods and Services Tax
- Others: Sale of Tender Papers, Sale of Scrape Materials, Penalty, Ferry Ghat Toll Collection, Ferry Ghat Kist Money, Irrigation Leavy Collection, Inspection Bunglow Rent

Signature of DDO :

Date :

FORM M.T.R. 26

[See Rule 213, 244(3), 246, 247, 252 & 254 of M.T.R]

Deposit Work

Bill No	:	TAN Number	:
Challan Number	:	Challan Date	:
E. P. No.	:	E.P. amount (in Rs)	:
Head of Accounts	:	E.P. Valid up to	:
DDO code & Office	:	U.O. No	:
Project Name	:		
Work Order No.	:		

- Amounts in Rupees

Beneficiary Name	Voucher No	Reference No	Cross Amount	Deductions													Total deduction	Net Amount
				CGST	SGST	IGST	IT	FR	IT on FR	LC	SD	VAT	Agency charge	Monopoly on FR	INTEREST on map	VAT on FR	Others	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20

- IT: Income Tax * VAT: Value-added Tax *SGST: State Goods and Services Tax * LC: Labour Cess
- FR: Forest Royalty * SD: Security Deposit * CGST: Central Goods and Services Tax * MAP: Mobilisation Advance Payment
- IGST: Integrated Goods and Services Tax
- Others: Sale of Tender Papers, Sale of Scrape Materials, Penalty, Ferry Ghat Toll Collection, Ferry Ghat Kist Money, Irrigation Levy Collection, Inspection Bunglow Rent

Signature of DDO :

Date :

FORM M.T.R. 27

[See Rule 261, 264, 265 & 265(B) of M.T.R]

Schedule showing the Subscriptions and refund of the GPF for the following Government Servant(s)

(Head of Account- 8009-01-101-04-00)

For the month of : Year :

AG Office :

Bill Id : Scheme Code :

Name of the Office : Treasury :

Sl. No.	Account No.	Name of Govt. Servant (EIN)	Pay - DP	Subscription	Pay/DA Arr Merge	GPF Arr	Refund Amount	Cur Inst/Total Inst.	Total	Remarks
Total (in Rs.)										

Total Rupees :

(Signature of DDO)

Designation :

FORM M.T. R. 28

[See Rule 261 of M.T.R]

Schedule showing NPS deductions for the following Government Servant(s)

For the Month of :

DDO Code No. & Name :

Head of Account :

Major Head :

Minor Head :

Sub Head :

Sl. No.	PRAN No.	EIN	Name of the Government Servant	Designation	Basic Pay*+DA+DP[from December 2007]+NPA(if any)	Contribution under Tier-1 at 10% of Basic Pay:+DA+DP+NPA (if any)	Total	Remarks
			Total (in Rs)					

Total Rupees :

Signature of TO/STO/ATO

Signature of DDO :

Designation :

FORM M.T.R. 29

[See Rule 263(1) of M.T.R]

Adjustable by…….
Voucher No…….
Dated……..

Bill for withdrawing Final payment
Advance
Other withdrawals
From General Provident Fund of Shri…….. (G.O)

The establishment
Of the…….. for the month of……...

Serial No.	Name of subscriber and Pay	General Provident Fund Ac-Count No.	No. and Date of sanction Letter of Authority	Final Payment / Advance / Other withdrawals	Acquittance
	TOTAL				

Net amount required for payment (in words) Rupees……..

Space for classification

Pay Rs……..
(Rupees……)

Treasury Officer.

Examined and entered.

Treasury Accountant.

Signature…….…..
Designation of the Drawing Officer…….
……...……
Station……
Date……..…

Contents received

Pay to……

Signature of the Drawing Officer……..

FORM M.T. R. 29-Concld.

Certificates

1. Certified that I have satisfied myself that all sums included in bill• in From T. R. 58-A drawn I month/2 months/ 3months previous to this date in favor of M/s .....Account No…….. ..... with the exception of those detailed below (of which the total has been refunded by deduction from this bill) have been disbursed to the proper persons, and that their acquittances have been taken and filled in my office with receipts stamp duly cancelled for every payment in excess of Rs. 20.

2. Certified that the balance at my credit/at the credit of the Subscriber on the date of the withdrawal coven the sum drawn in the bill. Certified also that the amount asked for in this bill is required to meet the yearly premium due on ……. In respect of Policy No……..with the …… Co. Ltd., and that the policy in question has been assigned to the President of India and is in the Custody of the Accounts officer…….(or the details of the policy proposed to be taken have been communicated to and accepted by the Accounts officer…….. in his letter No…… dated…….)

3. Certified also that the number of Policies financed from the General Provident Fund does not exceed four/the number of Policies financed from General Provident Fund exceeds four as these were accepted prior to 22nd.June,
195.

4. Certified that I have satisfied myself that the amount withdrawn previously on the same account has been utilized by the subscriber for the purpose for which it was intended and that the relevant premium receipt/receipts has/have been duly enfaced by me.

5. Certified that the presentation of this claim/application for withdrawal of this amount has been/was made within three months from the date of payment to the Life Insurance Corporation.

Signature .....

Designation .....

•Give details here if more than one policy has to be cited.

For use in Audit Office

Admitted Rs. .....
Objected Rs. .....
Auditor .....

Accountant.

FORM M.T.R. 30

[See Rule 279 of M.T.R]

Deposit repayment Order and Voucher

……. Treasury, month of …….. 20 .

……..

head of Account …… Deposits. Voucher No. ……. of

List of …….

Original *Number* ..... Date of *Deposit* ..... Name of *Deposit* ..... Amount originally *Deposited Rupees* .....

In this space a translation of the receipt form into the current Indian language should be given

Examined and entered

Date ……

Accountant,

Treasury,

Pay (Rs. ……..) Rupees……

Treasury Officer,

Date ……..

Received this …… day of ……19

The sum of Rupees …….

Being the amount payable ……..

on account of the deposit described above

Claimant's Signature

Passed for payment to …….

Rs. …….. Rupees ……

Judge, Magistrate or other Officer.

Date ……..

Form M.T.R. 31

[See Rule 287 & 288 of M.T.R]

Refund of Lapsed Deposit, Application and Voucher

To

The Accountant General*
Treasury Officer

Sir,

The following refunds of Lapsed Deposit aggregating Rupees …… (in words) have been claimed by ……. Of whose identity and title to the money I have satisfied myself* your sanction to the refund. That the amount may be refunded.

Class of Deposits	Particulars of original deposit		Balance credited to the Government		Date of lapsed statement	Amount claimed		Remark
	Year	No.	Rs.	P.		Rs.	P.	

*Delete whichever not applicable.

Signature
Judge, Magistrate or other Officer

Date …….

Form M.T.R. 31-A

[See Rule 314 of M.T.R]

Schedule of recoveries of _____ advance for the month of _____ 19

Name and designation	Month in which original advance was draw	Amount of original advance	Number of instalments of recovery	Amount deducted in the bill against Principal/Interest	Total recovered to end of the month	Balance outstanding	Remarks regarding transfer and leave of official, non-recovery of instalments, etc.
1	2	3	4	5	6	7	8

*Type of Advance.

** Strike out whichever is not applicable

Signature of the Head of the Office

Designation ……

Form M.T.R. 31-B

[See Rule 314 of M.T.R]

Schedule of recoveries of Festival Advance for the Month of ……20 .

Major head of account in which the pay and allowances of the incumbents are adjusted.

Sl. No.	No. & date of the treasury vouchers in which the advance has been drawn	Designation of the Drawing Officer by whom advance was drawn	Amount of advance	Amount recovered	Remarks
1	2	3	4	5	6

Part A : Recoveries in respect of advances drawn and disbursed by the Drawing Officer who makes the recoveries.

Part B : Recoveries in respect of advances drawn and paid by other Drawing Officers.

Total of Part A & B : Rs.

Certificate : 1. Certificate that the total of recoveries shown in Col. 5 above agrees with the amount actually recovered and shown in the body of the bill.

2. Certificate that the recoveries effected have been duly posted in the register of Advances (Form 'A').

Signature of Drawing Officer

Notes 1. That total of column 5 (Parts A & B together) should agree with the total deduction shown in the bill on account of the particular advance.

2. A separate schedule should be prepared for each bill.

3. In respect of persons transferred from one office to another, an indication regarding the office from which they are transferred and the amounts of advance outstanding against them at the time of transfer should be given in the remarks column against Part B.

Form M.T.R. 32

[See Note 2 of Rule 141(3) of M.T.R]

Register of undisbursed pay and allowances, etc.

Sl. No.	Bill No. & Date	Net amount of the bill	Date of encashment	Total amount remaining undisbursed	Particulars of the amounts shown in Col. 5			Dated initials of the G.O.	Date of Disbursement	Dated initials of the G.O.	Remarks
					Name	Amount					
1	2	3	4	5	6	7		8	9	10	11
						Rs.	P.				

Form M.T.R. 33

[See Rule 96 (1) of M.T.R]

To

The Treasury Officer ……..

State/Reserve Bank of India ……..

Please Pay Bill No. …… dated the …….. for Rs. …… (in words) ……. to …… of the office of the …… whose attested specimen signature is given below.

Attested Specimen Signature …….

Dated ……., the

Signature of the Drawing Officer/Endorse

Received payment
Dated

(Signature of the person
receiving payment)

Form M.T.R. 34

[See Rule 126 of M.T.R]

Last Pay Certificate

Last pay certificate …….....
of the …….....
proceeding on …….
to.....

2. He has been paid up to ……..
at the following rates: -

Particulars

Substantive pay……
Officiating pay ……

Deduction

……
……
……

3. His General Provident Fund Account No…….. is maintained by the Accountant General……...

4. He made over charge of the office of……
……on
the…….noon of…….

5. Recoveries are to be made from the pay of the Government servant as detailed on the reverse.

6. He has been paid leave salary as detailed below. Deductions have been made as noted on the reverse.

Period	Rate	Amount
From……..to…….	at Rs……...a month.	
From……..to…….	at Rs……...a month.	
From……..to…….	at Rs……...a month.	

7. He is entitled to draw the following:-
8. He is also entitled to joining time for …… days.
9. He finances the insurance policies detailed below from the provident fund:-

Name of Insurance Company	No. of Policy	Amount of premium	Due date for the payment of premium

10. The details of the income-tax recovered from him up to the date from the beginning of the current year are noted on the reverse.

(Signature)……
(Designation)……

Dated ..... 20 .

Note: Against Serial No. 3, the information should be incorporated by the head of the office in case of non-gazetted Government servants, and by the Treasury Officers/ Officer himself in case of gazetted officers. In addition, when a Government servant is transferred from one audit circle to another, the name of the Accounts Officer who will maintain General Provident Fund Account after transfer, should also be recorded in the case of gazetted officer by the Accountant General while countersigning the last pay certificate, and by the head of the office in the case of non-gazetted Government servants, if possible.

Form M.T.R. 34

(Reverse)

Last Pay Certificate

Details of recoveries

Nature of recovery……..

Amount Rs ……...

To be recovered in……instalment

Deductions made from the leave salary

From……to……..on account……..Rs……..
From……to……..on account……..Rs……..
From……to……..on account……..Rs……..

Names of months	Pay	Gratuity, Fee, etc.	Funds and other Deductions	Amount of income-tax recovered	Remarks
April 20					
May 20					
June 20					
July 20					
August 20					
September 20					
October 20					
November 20					
December 20					
January 20					
February 20					
March 20					

Form M.T.R. 35

[See Rule 52-A of M.T.R]

CHEQUE ISSUE REGISTER

Name of Office :

DDO Code :

Sl. No.	To whom issued	Particulars	Cheque No	Date of Issue	Amount in Rs.	Signature of issuing Authority	Remarks
1	2	3	4	5	6	7	8

Form M.T.R. 36

[See Rule 52-A of M.T.R]

Register of Valuables

Name of Office :
DDO Code :

Sl. No.	From whom tendered	Purpose for valuable(s)	Particular of valuable (s)					Refund		Signature of issuing authority	Remarks
			Type of Valuable(s)	Identification no. of Valuable (s)	Values in Rs.	Validity Date	Re-validation & date	Refund date	Authority for refund made		
1	2	3	4	5	6	7	8	9	10	11	12