CENTRAL UNIVERSITY OF KARNATAKA

ಕರ್ನಾಟಕ ಕೇಂದ್ರೀಯ ವಿಶ್ವವಿದ್ಯಾಲಯ

FORM - 10

II Floor, Karya Soudha, CUK, Aland Road, Kadaganchi – 585 367

BILL FOR PAYMENT BY FINANCE SECTION

School/Dept./Section: _____, Drawee_____

Bill No._____ Budget Head _____ Sub Head_____

Budget Head Description: _____

Debit CA/SB/A/c No: _____

Name of the Recipient: _____

Administrative Sanction – File No: _____ Page No: _____ Para No_____

Scheme/Purchase/Material Order No.: _____Date: _____

Financial Sanction Order No.:_____ Amount_____, Date of FSO_____

Sl. No.	Particulars		Amount
1	**Invoice/Bill/Claim Amount**		
2 (i)	**Add GST- Specify Tax Class: IGST/CGST (Specify %)-_**	(+)	
2 (ii)	**Add SGST (Specify %)-**	(+)	
3	**Gross of Debit Amount (1+2 i+2 ii)**	=	
4	**Recoveries to be Credited to CUK**		
4 (i)		(-)	
4 (ii)		(-)	
4 (iii)		(-)	
5	**Amounts to be Credited to Other Heads/Departments**		
6 (i)	**IGST TDS- 2% or CGST TDS- 1%**	(-)	
6 (ii)	**SGST TDS- 1%**	(-)	
6 (iii)	**IT TDS- Specify %**	(-)	
6 (iv)	**Professional Tax**	(-)	
6 (v)		(-)	
6 (vi)		(-)	
6 (viii)		(-)	
7	**Net to be Paid**	=	

Passed for payment of Rs. (Gross)_____and Net payment of Rs._____to the Payee_____ and by Recoveries of Rs._____.

- Certified that the articles mentioned in the bill have been correctly received in good condition according to quantity and specification mentioned in the purchase order.
- Certified that articles mentioned in the bill have been correctly entered in the ***Stock Registrar No. _____ at Page No. _____.***
- Certified that the amount has not already been paid that the voucher attached is the original one.
- Certified that the freight and other charges mentioned in the bill have verified and found to be correct.

Assistant	HoD	Dean	AR	DR	Registrar

To be filled by Finance & Accounts Section

Paid from A/c. No. _____ Voucher/Tally Ref No. _____

Cheque/Transaction ID No._____ Date: _____

Assistant	S.O.	AR	DR	Finance Officer

Additional Notes or Remarks (If any):

1.

2.

3.