

GURUGRAM UNIVERSITY, GURUGRAM

CONTINGENT VOUCHER

Voucher No. _____

Date _____

Department/Office _____

Major Head _____ Sub-Head _____ Month _____

Sr. No.	Name of the Payee and brief description of the item with bill /invoice no. and date.	Gross Amount of Voucher	TDS	GST	Labour Cess	Security/ Misc. Ded.	Total Deduction	Net Payable

Budget Allocation _____

Expenditure of this voucher _____

Previous Expenditure _____

Total Expenditure _____

Balance _____

CERTIFICATE

1. It is certified that the expenditure incurred in this bill is as per University Rules.
2. It is certified that the quality and quantity of material/store purchased are as per requirement and specifications and rates are reasonable as per prevailing market rates.
3. Certified that payment of this bill being put up for the first time.

Signature of HOD
(with stamp)

Name _____

Signature _____

For Accounts Branch Only

Passed for Rs. _____

_____ (Gross)

but Net amount to be paid Rs. _____

_____.

after deductions as mentioned above.

Asstt./Acctt.

S.O.

S.A.O.

F.O.

For Audit Branch Only

Passed for Rs. _____

_____ (Gross)

but Net amount to be paid Rs. _____

_____.

after deductions as mentioned above.

Auditor

RSA

Deputy Director