

Conf. 3030708110430

View Contingent Bill

Help

Disbursement Type* Bill Type*

Reference Number for Cash Branch

Fund* Bill Date*

Segment* Sub Segment*

Field* Sub Field*

Functionary*

Sanction By* Sanctioned On*

Sanction Details

Created By Verified By

Confirmed By Approved By

Bill Status

Narration

Remarks

Reference JV

Function Name	Account Code*	Account Head	Amount*	Details
Public Health	2101000	SALARIES,WAGES AND BONUS	1089	Click
Gross			1089	

Deductions				
Account Code	Account Head	Amount	Details	
		0	Click	

Deductions	<input type="text" value="0"/>
Net Payable	<input type="text" value="1089"/>

Net Payable in words

*- Mandatory Fields

