

View Contingent Bill

Disbursement Type* Help
 Reference Number for Cash Branch Bill Type*
 Fund* Bill Date*
 Segment* Sub Segment
 Field* Sub Field*
 Functionary* Sanctioned On*
 Sanction By*

84

Sanction Details

Created By Verified By
 Confirmed By Approved By
 Bill Status

Narration

Remarks

Reference JV SubLedger Type

Function Name	Account Code*	Account Head	Amount*	Details
	<input type="text" value="3202011"/>	<input type="text" value="STG.OF ANTI MALARIA OPERATION"/>	<input type="text" value="6253"/>	<input type="text" value="Click"/>
Gross			<input type="text" value="6253"/>	

Deductions			
Account Code	Account Head	Amount	Details
<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text" value="Click"/>

Deductions	<input type="text" value="0"/>
Net Payable	<input type="text" value="6253"/>

Net Payable in words

Payable To *

* - Mandatory Fields

new

Handwritten notes:
e e b f
a e s e
a a h s

