



भारतीय प्रौद्योगिकी संस्थान दिल्ली

Indian Institute Of Technology Delhi

Hauz Khas, New Delhi-110 016.

Website :www.iitd.ac.in

HP Cartridges
from**Project**Fund

Dept/Center/Section/Unit/Cell Code : _____ Srl.No: _____

Ref. No. _____ date : _____

Sub : Payment for HP Cartridges from ProjectsTo
AR / DR (IRD Accounts)

We have purchased following HP cartridges from HP India appointed re-sellers M/s Vikel Business Corporation as per approved rate. The details are furnished below:

HP cartridge number	Rate	Quantity	Amount	RP/ CW / MI. No
Total Amount ↗				

The original bill is enclosed herewith along with this form for payment through IRD Accounts Section. The amount is to be debited from the said project. The necessary pass-order and receipt & Issue record is given in the back side of the paper.

Signature _____

Name of the indenter _____

Emp. Code : _____

Lab Name : _____

Contact No. : _____

Encl : 1) Original Bill

2) Pass-order & Receipt & Issue Record (given in the back side)

<p>Certified that the items on this sheet have been procured by me in good condition.</p> <p style="text-align: right;">Sing. of Buyer (s)</p> <p>Name (s) :</p> <p>E. Code (s) :</p> <p style="text-align: right;">Sing. of Storekeeper</p>	<p>For Adjustment/For Payment</p> <p>Passed for Rs.</p> <p>Deduction to be made Rs.</p> <p>On A/C of</p> <p>Already paid Rs.</p> <p>Balance now payable Rs.</p> <p>(In words)</p> <p>By cheque/ NEFT directly to vendor/through (name)</p> <p style="text-align: right;">Sign. Of HoD/ HoC/ PI E.Code:</p>
<p>HOD/Nominee to sign after ensuring that S. No. as put at the top of the previous page is in order.</p> <p style="text-align: right;">Sign.of PI/ CI or nominee</p>	

IRD A/Cs. Main Accounts /Audit / Stores

ISSUE RECORD

Date	Particulars of items	Quantity		Balance	Issued to Sign, Name & E. Code
		Received	Issued		
	HP Cartridge No _____				



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HP Cartridges
from

Institute
Fund

Dept/Center/Section/Unit/Cell Code : _____ Srl.No: _____

Ref. No. _____ date : _____

Sub : Payment for HP Cartridges from Institute Fund

To
AR / DR (Stores & Purchase)

We have purchased following HP cartridges from HP India appointed re-sellers M/s Vikel Business Corporation as per approved rate. The details are furnished below:

HP cartridge number	Rate	Quantity	Amount	Budget Code
Total Amount			₹	

The original bill is enclosed herewith along with this form for payment through main Accounts Section of the Institute. The amount is to be debited from the above said budget head of the department/center/section. The necessary pass-order and receipt & Issue record is given in the back side of the paper.

Signature _____

Name of the indenter _____

Emp. Code : _____

Lab Name : _____

Contact No. : _____

Encl : 1) The Original Bill

2) Pass order & Receipt & Issue Record (given in the back side).

<p>Certificate that the items on this sheet have been procured by me in good condition.</p> <p style="text-align: right;">Sing. of Buyer (s)</p> <p>Name (s) :</p> <p>E. Code (s) :</p> <p style="text-align: right;">Sing. of Storekeeper</p>	<p>For Adjustment/For Payment</p> <p>Passed for Rs.</p> <p>Deduction to be made Rs.</p> <p>On A/C of</p> <p>Already paid Rs.</p> <p>Balance now payable Rs.</p> <p>(In words)</p> <p>By cheque/ NEFT directly to vendor/through (name)</p> <p style="text-align: right;">Sign. Head of Dept/Center/Section/Unit/Cell</p>
<p>HOD/Nominee to sign after ensuring that S. No. as put at the top of the previous page is in order.</p> <p style="text-align: right;">Sign.of Head or nominee</p>	

IRD A/Cs. Main Accounts /Audit / Stores

ISSUE RECORD

Date	Particulars of items	Quantity		Balance	Issued to Sign, Name & E. Code
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