## NATIONAL INSTITUTE OF TECHNOLOGY, AGARTALA JIRANIA ,BARJALA, AGARTALA ,TRIPURA . PIN -799046

## **GENERAL ADVANCE ADJUSTMENT FORM (GAADJF)**

1	Name of the Applicant						
2	Designation of the Applicant						
3	Department/Section						
4	Email Id (official)						
5	Purpose of advance drawn						
6	Details of advance drawn :-	Amount of advance drawn Rs.					
		Bill no and date of d					
		Source of advance drawn					
7	Details of Adjustment	Total of expenditure	Bill etc.	Rs.			
		Less: Amount of adva	nce drawn		Rs		
		Balance amount Receivable from /Payable to Rs					
		Prof /Dr. /Mr. /Ms.					
8	No. of Bill/Voucher enclosed (Pls. see details in reverse)						
9	I declare that :- The voucher/bill etc. so submitted are original duly certified and signed. I have followed . GFR ,other prevailing Financial rules , Govt. of India guidelines etc. I have utilized the amount of advance as per mentioned purpose. I have refunded the balance amount, left after expenditure.  The above mentioned details are true to my belief and knowledge.						
	Date:	Signature of the Applicant					
10	Signature of the recommending	ignature of the recommending Authority					
44		Dean/Registrar/HoD/HoC/Section In charge/Other					
11	Brief comment of the Internal A	udity Finance:-	A	ccountant/AR(Audit)/AR(	Fin)/Audit officer		
12	Signature of the Approving Authority (As per limit of sanction , as applicable)						
			Registrar/Dean(P&D)/Dean(Sw)/Director I/c				
13	For any amount (May not required if approval is accorded in pt. no 12)						
			Director				
	Adjustment		Advance of Rs	or	nly , disbursed vide		
			Bill no:	dt:	has been adjusted and		
			recorded in A	dvance Register. Rs	only has been		
			refunded by t	he Applicant/reimbursed t	to the Applicant.		
			Acco	untant/Dy. Registra(Fin)/	Asst. Registrar(Fin)		

<sup>\*\*\*</sup> After recording the adjustment a copy to be sent to the Incumbent for his/her record and information

## NATIONAL INSTITUTE OF TECHNOLOGY , AGARTALA JIRANIA ,BARJALA, AGARTALA ,TRIPURA . PIN -799046 GENERAL ADVANCE ADJUSTMENT FORM (GAADJF) DETAILS OF EXPENDITURE INCURRED

Sl.no	Name of the Firm	Bill no/ Receipt no	Date	Description of the item(s)	Qty	Cost (Rs)

(Signature of the Applicant)