T. R. FORM NO. 7A [See G. O No. 6229-F(Y) Dt. 18/08/2015] By-Transfer Challan Form





S.O/A.A.O./Audit Officer

	Office: - PAO-III				Ref No: 20190506987117
Treasury Code :-	CAF				
D.D.O. Designation :-		ND4			
D.D.O. Code :-	DIRECTOR, S	UDA			
Reference No. :-	CAFUDA002	147			
Reference No	20190506987	117			
Bill No. & Date:	SUDA-21/2019-20	29/05/2019	Gross Amount (Rs.): 18	8541000 Net /	Amount (Rs.): 0
Total PF/ LF/ PL	Amount in this Bill: Rs.	18541000	By-Transfel	r Credit Amount in this	Bill: Rs.
Head of Account Debite	d: - 72-2217-05-19	92-00-019-31-02-V			
By-Transfer Credit Rs	Rupees (in words	3)	only as below:	:-	
Head of	Account Credited		Description		Amount (Rs.)
					A
		(in words) One Crore I	Eighty Five Lakh Forty One Thousa	and only as below:-	
	Account Credited		Description		Amount (Rs.)
	-120-00-013-07-00-0	DIRECTOR, SUI	DA		18541000
Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS
Bill Clerk		Accountant	28-05-19		Drawing & Disbursing Officer
Station :					≆ate Ur b an Developm ant Age
Station : 29/05/2019		ļ	For use at the Treasury		≆ate Ur ba n Developm ent Age
Station : Date : 29/05/2019 Accepted and amount to	ansferred vide:	Į.	For use at the Treasury		%ate Urban Development Age
Station : Date : 29/05/2019 Accepted and amount to Token No.	ansferred vide:		For use at the Treasury		≆ate Urban Development Age
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.:	ansferred vide:	Ī	For use at the Treasury Date: Date:		%ate Urban Development Age
Station : Date : 29/05/2019 Accepted and amount to Token No.	ansferred vide:		For use at the Treasury		3rate Urban Development Age
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.:	ansferred vide:		For use at the Treasury Date: Date:		rate Urban Development Age
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.:			For use at the Treasury Date: Date:		T.O./A.T.O./P.A.O./A.P.A.O.
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.: Challan No.	A.O.		For use at the Treasury Date: Date:	(Audit), West Be	T.O./A.T.O./P.A.O./A.P.A.O.
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.: Challan No. Accountant /J.J.	A.O. For us	e in the Office of	For use at the Treasury Date: Date: Date:	(Audit), West Be	T.O./A.T.O./P.A.O./A.P.A.O.
Station: Date: 29/05/2019 Accepted and amount to Token No. T.V. No.: Challan No. Accountant /J./	A.O.	e in the Office of	For use at the Treasury Date: Date: Date:	(Audit), West Be	T.O./A.T.O./P.A.O./A.P.A.O.

Auditor

T. R. FORM NO. 31 [See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197]

Grant-in-aid Bill/Consolidated Grant-in-aid Bill



Ref No: 20190506987117

Hanne	UI	u re	Office	
D.D.O.	Co	de	CAF	۳L

JDA002

Bill No

Date:

29/05/2019

Token No.

Date : Head Of Account Code 72-2217-05-192-00-019-V-31-02

T.V. No.

Date:

18541000

Net Amount: Rs.

SUDA-21/2019-20

Sanctioned by:	JT. SECRETARY, UD & MA	Sanction No. & Date:	49(SANC.)/MA/P/C-10/3S-	38/2012 (PT-II) - 2	PL Transfer: Rs. 29-May-2019 (Copy enclose	18541000 d)
Sanctioned Amount (F	Rs): 18541000	period From : 01/04/2019	period To : 31/03/2020	Purpose : IMPLE CARE	MENTATION OF URBAN P	RIMARY HEALTH ST BENGAL
Name of the Grantee	Institution					Amount (Rs.)
Total Amount Rupees	S :					

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NII	MII

AND/OR

PL Transfer Rs. 18541000 Rupees (in words) One Crore Eighty Five Lakh Forty One Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	18541000.00

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.

(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority,

(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.

(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master.

Station: Dated _20__ Signature of the D.D.O.

Designation

Rate Urban Development Agency

For use i	n the	Treasury
-----------	-------	----------

Ref No: 20190506987117

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND/OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

AND / OR

PL Transfer Rs. 18541000 Rupees (in words) One Crore Eighty Five Lakh Forty One Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	18541000.00

Examined and Entered.				
Accountant /J.A.O.	T.O./A.T.O./P.A.O./A	LPA.O.		
	For use in the Office	of the Accountant	General (Audit), West Bengal	
Admitted for Rs.				
Objected to Rs.				
Reason of Objection				
Auditor	S.O./A.A.O.		Audit Officer	

T. R. FORM NO. 7A [See G. O No. 6229-F(Y) Dt. 18/08/2015] By-Transfer Challan Form





20190506987074

Ref No

Name of the Treasury Office: -PAO-III Treasury Code :-CAF D.D.O. Designation :-DIRECTOR, SUDA D.D.O. Code :-CAFUDA002 Reference No. :-20190506987074 Bill No. & Date: SUDA-20/2019-20 29/05/2019 Gross Amount (Rs.): 7095000 0 Net Amount (Rs.): Total PF/ LF/ PL Amount in this Bill: Rs. 7095000 By-Transfer Credit Amount in this Bill: Rs. Head of Account Debited: -72-2217-05-191-00-068-31-02-V By-Transfer Credit Rs. _____ Rupees (in words) _ only as below:-Head of Account Credited Description Amount (Rs.) AND/OR PF/LF/PL-Transfer Credit Rs. 7095000 Rupees (in words) Seventy Lakh Ninety Five Thousand only as below:-Head of Account Credited Description Amount (Rs.) 00-8448-00-120-00-013-07-00-0 DIRECTOR, SUDA 7095000 Treasury Code Treasury Name **Operator Code** Scheme ID Scheme Description **Operator Name** COMMUNITY BASED PRIMARY HEATH CAF PAQ-III DIRECTOR, SUDA 21097 CARE SERVICES Bill Clerk Director Station: State Urban Development Agency Date: 29/05/2019 For use at the Treasury Accepted and amount transferred vide: Token No. Date: T.V. No.: Date: Challan No. Date: Accountant /J.A.O. T.O./A.T.O./P.A.O./A.P.A.O. For use in the Office of the Accountant General (Audit), West Bengal Admitted Rs. Objected Rs. Reasons for objections Auditor S.O/A.A.O./Audit Officer

T. R. FORM NO. 31 [See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197]

Grant-in-aid Bill/Consolidated Grant-in-aid Bill



Ref No: 20190506987074

Name		

D.D.O.Code CAFUDA002

SUDA-20/2019-20 Date: 29/05/2019

Token No.

Date:

T.V. No.

Date:

Head Of Account Code 72-2217-05-191-00-068-V-31-02

Gross Amount Rs

7095000 Net Amount: Pe

Dy Tennator De

DI T---- 0-

Ologo / Wilburk. 145.	1033000 148t All	ount. As.	by-Transfer: Rs.	NIL	PL Transfer: Rs.	7095000
Sanctioned by:	JT. SECRETARY, UD & MA DEPT.	Sanction No. & Date:	49(SANC.)/MA/P/C-10/3S-	38/2012 (PT-II) - :	29-May-2019 (Copy enclosed	d)
Sanctioned Amount (Rs): 7095000	period From : 01/04/2019	period To : 31/03/2020	Purpose : IMPLE CARE	MENTATION OF URBAN P	RIMARY HEALTH ST BENGAL
Name of the Grantee	s Institution		10-10-			Amount (Rs.)
Total Amount Rupee	es:					

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

by-Transier	CIEGR KS. NIL	Rupees (in	words)	MIF	as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

AND / OR

PL Transfer Rs. 7095000 Rupees (in words) Seventy Lakh Ninety Five Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	21097	COMMUNITY BASED PRIMARY HEATH CARE SERVICES	7095000.00

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.

(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority,

(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.

(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master.

Station: Dated_ 20 Signature of the D.D.O.

Designation

State Urban Development Agency

For	use	in	the	Treasury
	200	19.1	1110	I I G G G G I I

Ref No: 20190506987074

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

AND/OR

PL Transfer Rs. 7095000 Rupees (in words) Seventy Lakh Ninety Five Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	21097	COMMUNITY BASED PRIMARY HEATH CARE SERVICES	7095000.00

Examined and Entered.			
Accountant /J.A.O.	T.O./A.T.O./P.A.O./A.P.A.O.		
	For use in the Office of the A	Accountant General (Audit), West Bengal	
Admitted for Rs			
Objected to Rs.			
Reason of Objection			
Auditor	S.O./A.A.O.	Audit Officer	

GOVERNMENT OF WEST BENGAL

Tel:

Fax.

Memo No: 49(Sanction)/MA/P/C-10/3S-38/2012 (Pt-II)

Date: 29/05/2019

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2019 - 2020

1. Sanctioning Authority: Urban Development and Municipal Affairs

2. Name of the Grantee Institution: State Urban Development Agency

3. Address of the Grantee Institution: ILGUS Bhavan, HC Block, Sector - III, Salt Lake, Kolkata - 700 106.

4. Category of Grantee Institution: Others

5. Amount Sanctioned: 25636000 (in words Rs. Two Crore Fifty Six Lakh Thirty Six Thousand Only.)

6. Name of the DDO: DIRECTOR, SUDA

7. Department Code: UM-Urban Development and Municipal Affairs

8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III

9. Nature of Grant

(a) Recurring or Non-recurring: Non-Recurring

(b) Capital or Revenue: Revenue

10. Condition of Grant

Utilisation Certificate required: Yes

11. Category of Grant: Others

12. Purpose of Grant: Procurement of drugs for 50 ULBs under Urban Primary Health Care Services.

- 13. An amount of Rs 25636000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head of account As Shown in the Annexure, from the budget provision of the financial year,2019 2020 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code : As Shown in the Annexure.
- 15. Name of the Scheme : Urban Primary Health Care Service
- 16. The amount will be drawn in T.R. from No.31 only.
- 17. The sanctioned amount will be payable to State Urban Development Agency by Transfer Credit to the Head of Account of the LF/PL/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.
- 18. Remarks: Fund is released for procurement of drugs for 50 ULBs under Urban Primary Health Care Services subject to strict observation of all relevant financial rules & regulations including e-tender rules of Govt., timely completion of work, non-deviation of allotted fund, submission of UC in due course and adherence to the online EMD receipt/refund as per FD Memo No. 3975-F(Y) dt.28.07.16 and 2365-F(Y) dt.12.04.18. This is issued with the concurrence of F.A. and approval of Pr. Secretary of this Deptt.
- 19. Total released amount is within the Budget Provision of the above mentioned head of account during 2019 2020
- 20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1854-F.B. dated-26.03.2019with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

JOINT SECRETARY

Copy forwarded for information and necessary action to:-

- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works &Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Deptt., Group N / R of this Govt.
- 7. Finance Officer, SUDA.

JOINT SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

Amount	Sub-Alloting Code / DDO Code Designation	SI No.
25,636,000.00	CAFUDA002-DIRECTOR, SUDA	1.
25,636,000.00		

JOINT SECRETARY

Urban Development and Municipal Affairs

Annexure of Memo No- 49(Sanction)/MA/P/C-10/3S-38/2012 (Pt-II) Date- 29/05/2019



Treasury Name: PAO-III Pay & Accounts Office-III,

ID	Head of Account	Scheme Description	Object of Expenditure	Alloted Amount
193299	72-2217-05-191-068-31-02-V	Urban Primary Health Care Service	Other Grants	7095000
193300	72-2217-05-192-019-31-02-V	Urban Primary Health Care Service	Other Grants	18541000

25,636,000.00

JOINT SECRETARY

Urban Development and Municipal Affairs

GOVERNMENT OF WEST BENGAL

Tel:

Fax:

Memo No: 49(Sanction)/MA/P/C-10/3S-38/2012 (Pt-II)

Date: 29/05/2019

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2019 - 2020

1. Sanctioning Authority: Urban Development and Municipal Affairs

2. Name of the Grantee Institution: State Urban Development Agency

3. Address of the Grantee Institution: ILGUS Bhavan, HC Block, Sector - III, Salt Lake, Kolkata - 700 106.

4. Category of Grantee Institution: Others

5. Amount Sanctioned: 25636000 (in words Rs. Two Crore Fifty Six Lakh Thirty Six Thousand Only.)

6. Name of the DDO: DIRECTOR, SUDA

7. Department Code: UM-Urban Development and Municipal Affairs

8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III

9. Nature of Grant

(a) Recurring or Non-recurring: Non-Recurring

(b) Capital or Revenue: Revenue

10. Condition of Grant

Utilisation Certificate required: Yes

11. Category of Grant: Others

12. Purpose of Grant : Procurement of drugs for 50 ULBs under Urban Primary Health Care Services.

- 13. An amount of Rs 25636000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head of account As Shown in the Annexure, from the budget provision of the financial year,2019 2020 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code : As Shown in the Annexure.
- 15. Name of the Scheme : Urban Primary Health Care Service
- 16. The amount will be drawn in T.R. from No.31 only.
- 17. The sanctioned amount will be payable to State Urban Development Agency by Transfer Credit to the Head of Account of the LF/PL/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.
- 18. Remarks: Fund is released for procurement of drugs for 50 ULBs under Urban Primary Health Care Services subject to strict observation of all relevant financial rules & regulations including e-tender rules of Govt., timely completion of work, non-deviation of allotted fund, submission of UC in due course and adherence to the online EMD receipt/refund as per FD Memo No. 3975-F(Y) dt.28.07.16 and 2365-F(Y) dt.12.04.18. This is issued with the concurrence of F.A. and approval of Pr. Secretary of this Deptt.
- 19. Total released amount is within the Budget Provision of the above mentioned head of account during 2019 2020
- 20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1854-F.B. dated-26.03.2019with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

JOINT SECRETARY

Copy forwarded for information and necessary action to:-

- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works &Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Deptt., Group N / R of this Govt.
- 7. Finance Officer, SUDA.

JOINT SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

SI No.	Sub-Alloting Code / DDO Code Designation	Amount
1.	CAFUDA002-DIRECTOR, SUDA	25,636,000.00
		25,636,000.00

JOINT SECRETARY

Urban Development and Municipal Affairs

Annexure of Memo No- 49(Sanction)/MA/P/C-10/3S-38/2012 (Pt-II) Date- 29/05/2019

Allotment From Department - UM-Urban Development and Municipal Affairs to - CAFUDA002-DIRECTOR, SUDA

Treasury Name: PAO-III Pay & Accounts Office-III,

193299 72-2	217-05-191-068-31-02-V	Lieban Dringer, Health Oars			
		Urban Primary Health Care Service	Other Grants	20 (7095000
193300 72-2	217-05-192-019-31-02-V	Urban Primary Health Care Service	Other Grants	211	18541000

JOINT SECRETARY

Urban Development and Municipal Affairs



রাজ্য নগর উন্নয়ন সংস্থা STATE URBAN DEVELOPMENT AGENCY



"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ "ILGUS BHAVAN", H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

ক্রেমিক নং

SUDA-Health/501 Pt.-II/08/164 (06)

তারিখ28:02:2019

MEMORANDUM

Funds are hereby released electronically in favour of Urban Local Bodies towards Procurement of Drug from CMS approved Firm/s and at CMS approved rate upto the month of March, 2019 as per details shown in the following page for implementation of Urban Primary Health Care Services (UPHCS).

Statement of Expenditure (SOE) and Utilization (UC) may please be sent immediately after the cumulative funds on this component released in your favour is utilized.

Enclo.: As stated.

Yours faithfully,

Finance Officer, SUDA

H \Letter Head ULBs(2)_1st quarter, 2011-12 doc

Tel: 2358 6403/5767, Fax: 2358 5800, E-mail: wbsudadir@gmail.com

Account Section: 2358 6408

SL Name of ULB		Total Amount (In Rs.)	Payee Treasury Code	Operator Code of Payee	Scheme ID of the Payee Operator	Scheme Description of Payee Operator
I	Baruipur	76000	SPD	11	22349	Орегисот
2	Burdwan	911000	BUA	17	22361	
3	Darjeeling	150000	DAA	70	22409	Danasana
4	Titagarh	508000	NPC	16	22204	Procurement
5	Khardah	314000	NPC	10	22204	of Drug
6	Rishra	876000	HGF	14	22235	

Memo No. .. SUDA-Health/501 Pt.-II/08/164 (06)/1(2)

Dt. .. 28.02.2019

CC

1. The Mayor / Chairman, Municipal Corporation / Municipality

2. The Chief Public Health Officer, Health, SUDA

Finance Officer, SUDA



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Designation : DIRECTOR, SUDA

Local Advice ld

235

Local Advice Date: 27/02/2019

SUDA-HEALTH/501(PT.II)

Memo Date :

27/02/2019

For use of the Operator										For use of Treasury/PAO			
Reference No.	Details	of Payee Operator		Details of Recipient Operator									
	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180200004746	22285	UPHCS	SPD	Baruipur	11	CHAIRMAN.B ARUIPUR	22349	UPHCS	00-8448-00-102-00-001- 0-07-00	76000	PROCUREMENT OF DRUG UNDER UPHCS		
20180200004747	22285	UPHCS	BUA	Burdwan-I	17	chairman,burd	22361	URBAN PRIMARY	00-8448-90-102-00-001-	911000	PROCUREMENT OF DRUG UNDER UPHCS		
20180200004749	22285	UPHCS	DAA	Derjouting	70	CHAIRMAN, DARJEELING	22409	UPHCS	00-8448-00-102-00-001- 0-07-00	150000	PROCUREMENT OF DRUG UNDER UPHCS		
20180200004752	22285	UPHC8	NPC	Barrackpore	16	Chairman, Titagarh	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG UNDER UPHCS		
20180200004752	22265	UPHCS	NPC	Barrackpore-	10	Chairman, Khar dah	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	314000	PROCUREMENT OF DRUG UNDER UPHCS		
20180200004754	22285	UPHCS	HGF	Sreerampore	14	CHAIRMAN, RISHRA	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	876000	PROCUREMENT OF DRUG UNDER UPHCS		

Pay Rs. 2835000 Rupees(in words) Twenty Eight Lakh Thirty Five Thousand only as transfer.

Printed By: DEBARATI DATTA GUPTA

Signature of PL/LF/PF/OD Operator

Signature of Joint Signatory

State Urban Donalonmant Amenay

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

20180200004746

Net Amount:

76000

Operator Name: DIRECTOR, SUDA

Reference Number :

Reference Date: 26/02/2019

Status:

Reference Generated

DRUG UNDER UPHCS	76000	UPHCS	22349	CHAIRMAN.BARUI PUR	11	Baruipur	SPD	UPHCS	22285	7
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No.

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/02/2019 4:34 PM

State Urban De glopment Agency Director

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

DIRECTOR, SUDA

Operator Name:

Reference Number: 20180200004747

Net Amount:

911000

Reference Date: 26/02/2019

Reference Generated

Status:

DRUG UNDER UPHCS	911000	CARE SERVICES(2018-19)	22361	chairman,burdwan municipality	17	Burdwan-l	BUA	UPHCS	22285	_
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme id	No.

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/02/2019 4:35 PM

Signature of Joint Signatory

Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

DIRECTOR, SUDA

Operator Name:

Reference Number: 20180200004749

Net Amount:

150000

Reference Date: 26/02/2019

Reference Generated

Status:

DRUG UNDER UPHCS	150000	UPHCS	22409	CHAIRMAN, DARJEELING	70	Darjeeling	DAA	UPHCS	22285	4
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No.

1

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/02/2019 4:36 PM

E C

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Net Amount:

822000

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180200004752

Reference Date: 26/02/2019

Reference Generated

Status:

						-				ı
DRUG UNDER UPHCS	508000	UPHCS	22204	Chairman, Titagarh	16	Barrackpore	NPC	UPHCS	22285	N
TOTAL PROPERTY OF						1				
DRUG UNDER UPHCS	314000	UPHCS	22204	Chairman, Khardah Municipality	10	Barrackpore	NPC	UPHCS	22285	_
BEOCH DEMENT OF										
Purpose	Amount	Payee Scheme Description	Payee Scheme ld	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No.

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/02/2019 4:39 PM State Urban Declarational Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code:

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180200004754

Net Amount:

876000

Head of Account: 00-8448-00-120-00-013-0-23-00

Reference Date: 26/02/2019

Reference Generated

Status:

	_	No.
	22285	Scheme Id
	UPHCS	Scheme Description
	HGF	Treasury
	Sreerampor e II	Payee Treasury Name
	14	Payee Operator Code
	CHAIRMAN, RISHRA	Payee Operator Name
	22235	Payee Scheme Id
	UPHCS	Payee Scheme Description
	876000	Amount
DROG ONDER OPHCS	PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By : DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/02/2019 4:42 PM

Signature of Joint Signatory

STATE URBAN DEVELOPMENT AGENCY

Urban Primary Health Care Services (UPHCS) Group Summary

1-Apr-2018 to 20-Feb-2019

	Page 1
Particulars	Closing Balance
	Debit Credit
Interest on Urban Primary Health Care Services	3,08,87,614.00
Urban Primary Health Care Services (UPHCS)	7,38,49,007.58
Grand Total	10,47,36,621.58

0 0 17615 216824 0 239657 -268000 -6400 50100 9064389 231505 1675382 3738010 22405 900182 5326379 209100 775200	0 0 0 0 -354765 1 0 17515 240357 216824 0 -239657 297700 -268000 -6600 50100 10129561 9064389 231505 1675382 -8924 3738010 22405 900182	0 0 0 0 -354765 1 0 17515 240357 216824 0 -219657 297700 -268000 -6000 50100 10129561 9964389 231505 1675382	South Dum	South Dunn 0 0 0 0 0 0 0 0 0 0 0	South Dun Dun	South Dum Dum	South Dum Dum	South Dum Dum 0 0 0 0 0	Screen Division Divis	The same of the sa	-673227 21880 0 -21833	-16349 0 0 0	1402301 1107950 0 203092	11500	156262 0 27320	894000	876297 01 102081	364100 0 30000	36000	40400 -1410 3299	-98/4 44800 H627	Madhyangram 353272 234102 1557 16577	Komagar 22322 264162 07 2000	VAIC 0.0000 0 0.00000 0.00000 0.000000 0.000000	Khardan 20000 20001 0 192702	Anchrapata concer consor	22022 208163 0 34500	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	107604 -68530 0 27026	747447 1880050 77405 578531	625643 100827 0 0	-86580 -216000 0 0	485641 66159 5465 95391	201111 -367795 0 0 -	5070 19777 0	25,6821 0 617071 96,197	45720 41500	357038 76000 0 0	1999297 662323 48485 90148	267624 17460 0 0	48837 2190 0 6668	Barrackpore 103627 0 0 58500 1	419455 29501 12210 150	154167 43132 54800 72224	Bansheria 274267 5960 0 0	0 0 0 0	Haidy July 10217 458259 0 75853	Hon. / Salary Drug Rent Consugency Local		St. Name of ULB (FY - 2018-19)	The state of the s
	6449164 1500				21100837 1775	73200 45		1	-337149 40		100	-16349 68	2713343 64					T									365695 295			-	1					707433				1	100		461316 674		280227 350		644329 208	Hon. / Salary			N. Santalana
	150075600 25980000	Т		- [177510300 30584000	4551300 1168		1		7073500 736	7302900 1040	6829200 292	-					0000000 000000000000000000000000000000							9697200 2016000												2890800 736000		14			12	-		3503200 1016000		2089600 456000	mary Drug	1	Total Fut	
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I	0007867		00 1765000		00 9207000	0 280000	200000	Der on		00 350000	0 225000	01 280000	000000	T	T	25000	260000	0 7400	OCCUPATION OF	245000				0 120000	0 875000	0 140000					0 225000	0 155000	0000011			000561	0000000				0, 35000	0 195000		120000		0	0 42000	Commigancy	Contingent	Total Fund Released (FY - 2018-19)	
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106822324	- 1	95706035				10000000	\neg		4864707	T	Delegen			T	2742492	572972		1996911			4562563	0			9108087	885581	3329201	0	944319	0	3778578	2347347	2141577	2000309	4118776	2008202	2346632	2028370	341512	3519750	CACOCI	106440	Colthery	341741 hh/14/	COOLCTE	2461905	1955762		Total	99	
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96929838 27817704 1069590		79706698 19898462	7919242		96929838 2/81//04 1007570	77917704	584000	1797394 \ 800824	-206872 -253999	A CONTRACTOR	COOLEC	641990	2	1		1	1192000	É			534560		1016310	290839			Г			315	T	Т	Т		1	745325	386726	658889			K	5	C 508000	949501	A 226120	175704	007776	Morrer	Drug	ing Balance	
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6787681		4613384	2174297	2	100/0/0	6787681	84000	-9657	CITO	34102	250000	68167	0	545592	250000	62320	258000	294401	1500	24500	75504	264827	73742	36000	606203	204411	57000	140000	25107	12/3351	0/00/	6,7000	008081	46500	26000	294563	90775	181500	35000	257356	33000	2641	253500	196150	197774	0	0.007	L30411	Contingency	Closing Balance by ELB (FY - 2018-19)	
6787681 AMMUUAAA		4613384 ########	2174297 27426184	LOISTER	The Person Name of Street, or other Persons Name of Street, or oth	BUTTON	2277000	2588561	-4UU-00	935.00F	OGFICES	3496840	873954	7631598	5609863	1215938	4918363	3156494	894005	1085797	2104588	6994132	3699899	1042442	5995800	3743475	344994	5928300	447071	1847/353	4230392	12002/3	1803/19	1199409	608122	3003031	1584354	3073810	1957626	7651594	2060730	114146	3858027	6720741	1056979	742622	1010/71	7312161	Total	N. S.	Total Sile

IPP-VIII (Extn.) Balance till date

ULB	Salaries / Hon.	Contingency	Drug	Rent	Total
Alipurduar	988253	51649	84880	111899	1236681
Balurghat	1897218	30926	157787	45440	2131371
Burdwan	1710993	621538	409253	700666	3442450
Darjeeling	1417116	129427	437887	28010	2012440
Durgapur	9042915	623504	2490010	91465	12247894
English Bazar	1021774	756844	1651292	17860	3447770
Jalpaiguri	624426	-157493	246335	101229	814497
Kharagpur	6748025	336063	1460626	149450	8694164
Raiganj	1906940	198919	-74452	0	2031407
Siliguri	368558	125879	1873308	386942	2754687
Total	25726218	2717256	8736926	1632961	38813361

RCH Sub-Project Balance till date

Asansol 9905749 826871 774000 229965 11736565	Asansol	9905749	826871	774000	229965	11736585
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Total=>	35631967	3544127	9510926	1862926	50549946
48.39000 444 LANG 550 DEBMA 350	AND REPORT OF THE PARTY OF THE	The second secon			



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

SUDA-Health/144/08/163

Ref No.

Date 02.2019

From: Director, SUDA

To

The Joint Secretary

To the Govt. of West Bengal

UD & MA Department (MA Branch)

Nagaryan DF-8, Sector- I

Salt Lake, Kolkata- 700106

Sir,

In reference to your communication bearing no. 94/MA/C-10/3S-38/2012 (Pt.-II) dt. 05.02.2018, I am to inform you that no further fund under the heading "Procurement of Drug" for 50 ULBs implementing UPHCS is required for the F.Y 2018-19.

Yours faithfully,

Director, SUDA

D:\Dr Goswami\SUDA\Letterhead Misc. (1).doc

Tel/Fax No.: 359-3184



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code:

19

Operator Designation : DIRECTOR, SUDA

Local Advice ld :

Head of Account: 00-8448-00-120-00-013-0-23-00

Local Advice Date : 28/01/2019

SUDA-HEALTH/501(PT-II)

28/01/2019 Memo Date :

					For use	of the Operato	r						ry/PAO
	Details	of Payee Operator			Det	tails of Recipie	nt Operato	r					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objecte
20180100004316	22285	UPHCS	HGB	Hooghly-II	9	CHAIRMAN BANSBERIA	22058	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	UPHCS-PROCUREMENT OF DRUG		
20180100004316	22285	UPHCS	HG8	Hooghly-II	8	CHAIRMAN HLY-CNS	22058	UPHC8	00-8448-00-102-00-001- 0-07-00	520000	UPHCS-PROCUREMENT OF DRUG		
20180100004317	22285	UPHCS	NPA	Barasat-I	8	CHAIRMAN, BARASAT	22094	UPHCS	00-8448-00-102-00-001- 0-07-00	608000	UPHCS-PROCUREMENT OF DRUG		
20180100004317	22295	UPHCS	NPA	Barasat-I	13	CHAIRMAN, MADHYAMGR	22094	UPHCS	00-8448-00-102-00-001- 0-07-00	500000	UPHCS-PROCUREMENT OF DRUG		
20180100004318	22285	UPHCS	HGD	Chandernag	5	Chairman, Bhe dreswar	22295	UPHCS	0-07-00	724000	UPHCS-PROCUREMENT OF DRUG		
20180100004318	22285	UPHCS	HGD	Chandernag	4	Commissioner, Chandernagor	22295	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	UPHCS-PROCUREMENT OF DRUG		
20180100004318	22285	UPHCS	HGD	Chandemag	6	Chairman, Cha mpdani	22295	UPHCS	00-8448-00-102-00-001- 0-07-00	389600	UPHCS-PROCUREMENT OF DRUG		
20180100004319	22285	UPHCS ¶	DOA	Balurghat-i	13	BALURGHAT MUNICIPALIT	22390	UPHCS	00-8448-00-102-00-001- 0-07-00	432000	UPHCS-PROCUREMENT OF DRUG		
20180100004320	22265	UPHC8 +	HGF	Breerampore	12	CHAIRMAN, BAIDYABATI	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	228000	UPHCS-PROCUREMENT OF DRUG		
20180100004320	22265	UPHCS	HGF	Sreerampore II	16	CHAIRMAN,K ONNAGAR	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	292000	UPHCS-PROCUREMENT OF DRUG		
20180100004320	22285	UPHCS	HGF	Breerampore	10	CHAIRMAN, SERAMPORE	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	520000	UPHCS-PROCUREMENT OF DRUG		
20160100004320	22285	UPHCS	HGF	Sreerumpore	18	CHAIRMAN,U TTARPARA-	22235	UPHCS	0-8448-00-102-00-001- 0-07-00	584000	UPHCS-PROCUREMENT OF DRUG		

Pay Rs. 5800000 Rupees(in words) Fifty Eight Lakh only as transfer.



Signature of PL/LF/PF/OD Operator

The Land Devolution & Property

Page 1 of 1

Printed By: DEBARATI DATTA GUPTA

Reference Details PAO-III

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180100004316

Net Amount:

1028000

Reference Date : 28/01/2019

Reference Generated

Status :

2	->	No.
22285	22285	Scheme Id
UPHCS	UPHCS	Scheme Description
HGB	HGB	Payee Treasury Code
Hooghly-II	Hooghly-II	Payee Treasury Name
9	8	Payee Operator Code
CHAIRMAN BANSBERIA	CHAIRMAN HLY- CNS	Payee Operator Name
22058	22058	Payee Scheme Id
UPHCS	UPHCS	Payee Scheme Description
508000	520000	Amount
UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 3:45 PM

Sint Urban Severing mont seems

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Net Amount:

1116000

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180100004317

Reference Date :

28/01/2019

Reference Generated

Status:

		_
2	-	No.
22285	22285	Scheme Id
UPHCS	UPHCS	Scheme Description
NPA	NPA	Payee Treasury Code
Barasat-I	Barasat-I	Payee Treasury Name
00	13	Payee Operator Code
CHAIRMAN, BARASAT	CHAIRMAN, MADHYAMGRAM	Payee Operator Name
22094	22094	Payee Scheme Id
UPHCS	UPHCS	Payee Scheme Description
608000	508000	Amount
UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose

R

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 3:49 PM

State Urban Dewolubrient Agons, Director

Signature of Joint Signatory

Reference Details PAO-III

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Name: Operator Code: 19

DIRECTOR, SUDA

Reference Number: 20180100004318

Net Amount:

1600000

Reference Date: 28/01/2019

Reference Generated

Status:

	1	_	
ω	2	_	No.
22285	22285	22285	Scheme Id
UPHCS	UPHCS	UPHCS	Scheme Description
HGD	HGD	HGD	Payee Treasury Code
Chanderna gore	Chanderna gore	Chanderna gore	Payee Treasury Name
4	o	ڻ.	Payee Operator Code
Commissioner, Chandemagore	Chairman,Champda ni	Chairman,Bhadresw ar	Payee Operator Name
22295	22295	22295	Payee Scheme Id
UPHCS	UPHCS	UPHCS	Payee Scheme Description
508000	368000	724000	Amount
UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 3:52 PM

Director State Urban Development Agrees

Signature of Joint Signatory

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

Operator Name : DIRECTOR, SUDA

Reference Number : 20180100004319

Net Amount:

432000

Reference Date: 28/01/2019

Reference Generated

Status:

-	No. S				
22285	Scheme Id				
UPHCS	Scheme Description				
DDA	Payee Treasury Code				
Balurghat-I	Payee Treasury Name				
13	Payee Operator Code				
BALURGHAT	Payee Operator Name				
22390	stor Payee Scheme Id				
UPHCS	Payee Scheme Description				
432000	Payee Payee Operator Payee Operator Name Code Name Scheme Id				
UPHCS- PROCUREMENT OF	Purpose				

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 3:56 PM

Director State Urban Development Agrancy

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code:

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180100004320

Net Amount :

1624000

Reference Date : 28/01/2019

Status

Reference Generated

4	ω	2		No.
22285	22285	22285	22285	Scheme ld
UPHCS	UPHCS	UPHCS	UPHCS	Scheme Description
HGF	HGF	HGF	HGF	Payee Treasury Code
Sreerampor e II	Sreerampor e II	Sreerampor e II	Sreerampor e II	Payee Treasury Name
16	10	18	12	Payee Operator Code
CHAIRMAN,KONNA GAR	CHAIRMAN, SERAMPORE	CHAIRMAN,UTTAR PARA-	CHAIRMAN, BAIDYABATI	Payee Operator Name
22235	22235	22235	22235	Payee Scheme Id
UPHCS	UPHCS	UPHCS	UPHCS	Payee Scheme Description
292000	520000	584000	228000	Amount
UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose



Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 3:58 PM

State Urban Dayslublish (Agring) Director

Signature of Joint Signatory



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

19

Operator Designation : DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-013-0-23-00

Local Advice Date: 28/01/2019

Memo No.:

SUDA-HEALTH/501(PT-II)

Memo Date : 28/01/2019

For use of the Operator										For use of Treasury/PAO			
	Details	s of Payee Operator			Der	tails of Recipie	nt Operato	н					
Reference No.	Scheme id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme id of Payee Operator	Scheme Description of Payes Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved C	Objecte
20180100004321	22285	UPHCS	NPC	Ваггаскроге-	4	Chairman, Bhat para	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	736000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	5	Chairman, DumDum	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	572000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS 🐞	NPC	Barrackpore-	6	Chairman, Garulia	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	368000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	7	Chairman, Halis ahar	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	368000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	11	Chairman, Naihati	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	12	Chairman, New	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	14	Chairman, Pani hati	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	596000	UPHCS-PROCUREMENT OF DRUG		
20180100004321	22285	UPHCS	NPC	Barrackpore-	13	Chairman, North	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	724000	UPHCS-PROCUREMENT OF DRUG		
20180100004322	22285	UPHCS	SPB	Alipore-II	8	CHAIRMAN PUJALI	22324	UPHCS	00-8448-00-102-00-001- 0-07-00	76000	UPHCS-PROCUREMENT OF DRUG		
20180100004322	22285	UPHCS	SPB	Allpore-II	2	CHAIRMAN;B UDGE	22324	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	UPHCS-PROCUREMENT OF DRUG		
20180100004323	22285	UPHCS	BUE	Durgapur	12	MAYOR D.M.C(LF)	22371	UPHCS	00-8448-00-102-00-001- 0-07-00	1168000	UPHCS-PROCUREMENT OF DRUG		

Pay Rs. 6132000 Rupees(in words) Sixty One Lakh Thirty Two Thousand only as transfer.



Signature of PL/LF/PF/OD Operator

Signature of Joint Signatory

Printed By: DEBARATI DATTA GUPTA

Maybe through the entire tenth & Property



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING "ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref SUDA-Health/501 Pt.-III/16/162(27)

01.02.2019

MEMORANDUM

Funds are hereby released electronically in favour of Urban Local Bodies towards Procurement of Drug from CMS approved Firm/s and at CMS approved rate upto the month of March, 2019 as per details shown in the following page for implementation of Urban Primary Health Care Services (UPHCS).

Statement of Expenditure (SOE) and Utilization (UC) may please be sent immediately after the cumulative funds on this component released in your favour is utilized.

Enclo. : As stated.

Yours faithfully,

Finance Officer, SUDA

CAL was Head III Rs(2) 1st quarter, 2011-12 doc

Tel/Fax No.: 359-3184



SL No.	Name of ULB	Total Amount (In Rs.)	Payee Treasury Code	Operator Code of Payee	Scheme ID of the Payee Operator	Scheme Description of Payee Operator
1	Bansberia	508000	HGB	9	22058	
2	Balurghat	432000	DDA	13	22390	
3	Baidyabati	228000	HGF	12	22235	
4	Barasat	608000	NPA	8	22094	
5	Bhadreswar	724000	HGD	5	22295	
6	Bhatpara	736000	NPC	4	22204	
7	Budge Budge	508000	SPB	2	22324	
8	Champdany	368000	HGD	6	22295	
9	Chandernagore MC	508000	HGD	4	22295	
10	Dum Dum	572000	NPC	5	22204	
11	Durgapur MC	1168000	BUE	12	22371	
12	Gayeshpur	292000	NAC	17	22074	
13	Garulia	368000	NPC	6	22204	D
14	Halisahar	368000	NPC	7	22204	Procurement
15	Hooghly Chinsurah	520000	HGB	8	22058	of Drug
16	Kalyani	76000	NAC	13	22074	
17	Kharagpur	584000	MIF	11	22379	
18	Konnagar	292000	HGF	16	22235	
19	Madhyamgram	508000	NPA	13	22094	
20	Naihati	508000	NPC	11	22204	
21	New Barrackpore	508000	NPC	12	22204	
22	North Barrackpore	724000	NPC	13	22204	
23	Panihati	596000	NPC	14	22204	
24	Pujali	76000	SPB	6	22324	
25	Raiganj	432000	UDB	13	22210	
26	Serampore	520000	HGF	18	22235	
27	Uttarpara Kotrung	584000	HGF	18	22235	

Memo No. .. SUDA-Health/501 Pt.-III/16/162(27)/1(2)

Dt. .. 01.02.2019

CC

1. The Mayor / Chairman, Municipal Corporation / Municipality

2. The Chief Public Health Officer, Health, SUDA

Finance Officer, SUDA

Reference Details PAO-III

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number : 20180100004321

Net Amount:

4380000

Reference Date : 28/01/2019

Reference Generated

Status:

Signa	00	7	6	5	4	ω	N	<u> </u>	No.
ture of the A	22285	22285	22285	22285	22285	22285	22285	22285	Scheme Id
Signature of the Assistant/Accountant	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	Scheme Description
rtant	NPC	NPC	NPC	NPC	NPC	NPC	NPC	NPC	Payee Treasury Code
	Barrackpore	Barrackpore -I	Barrackpore -I	Barrackpore -I	Barrackpore	Barrackpore -I	Barrackpore -I	Barrackpore	Payee Treasury Name
	7	3	12	<u> </u>	14	6	5	4	Payee Operator Code
Signature of	Chairman,Halisahar Municipality	Chairman, North Barrackpore	Chairman, New Barrackpore	Chairman, Naihati Municipality	Chairman,Panihati Municipality	Chairman, Garulia Municipality	Chairman, DumDum Municipality	Chairman,Bhatpara Municipality	Payee Operator Name
Signature of the Administrator	22204	22204	22204	22204	22204	22204	22204	22204	Payee Scheme Id
	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	UPHCS	Payee Scheme Description
Sign:	368000	724000	508000	508000	596000	368000	572000	736000	Amount
Signature of Joint Signatory	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose

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Page 1 of 1

Printed By: DIPANKAR CHOWDHURY

Director Description Maria

PAO-III

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19

DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Name: Reference Number:

20180100004322

Net Amount:

584000

Reference Date: 28/01/2019

Reference Generated

Status

1	s		No.
22400	38666	22285	Scheme Id
onica	10HCc	UPHCS	Scheme Description
0	CDD	SPB	Payee Treasury Code
Allpore-II		Alipore-II	Payee Treasury Name
)	6	Payee Operator Code
BUDGE	CHAIRMAN:BUDGE	CHAIRMAN PUJALI MUNICIPALITY	Payee Operator Name
22324		22324	Payee Scheme Id
UPHCS		UPHCS	Payee Scheme Description
508000		76000	Amount
PROCUREMENT OF	IIBUCO	UPHCS- PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 4:04 PM

State Street Daysuburner Reserve Director

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180100004323

Net Amount:

1168000

Reference Date: 28/01/2019

Reference Generated

Status :

_	No.
22285	Scheme ld
UPHCS	Scheme Description
BUE	Payee Treasury Code
Durgapur	Payee Treasury Name
12	Payee Operator Code
MAYOR D.M.C(LF)	Payee Operator Name
22371	Payee Scheme Id
UPHCS	Payee Scheme Description
1168000	Amount
UPHCS- PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 4:05 PM

Direction Add

Signature of Joint Signatory

Page 1 of 1

A Paris Company of the Paris C



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Operator Designation:

DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-013-0-23-00

Local Advice Id: 234 Local Advice Date: 28/01/2019

Memo No. : Memo Date :

SUDA-HEALTH/501(PT-II)

28/01/2019

					For use	of the Operato	r					For u	ry/PAO
	Details	s of Payee Operator			Del	tails of Recipie	nt Operato	r					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator		Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180100004324	22285	UPHCS	NAC	Kalyani	17	CHAIRMAN, GAYESHPUR	22074	UPHCS	00-8448-00-102-00-001- 0-07-00	292000	UPHCS-PROCUREMENT OF DRUG		
20180100004324	22285	UPHCS	NAC	Kalyani	13	CHAIRMAN, KALYANI	22074	UPHCS	00-8448-00-102-00-001- 0-07-00	76000	UPHCS-PROCUREMENT OF DRUG		
20180100004325	22265	UPHCS	MIF	Kharagpur	11	CHAIRMAN KHARAGPUR	22379	UPHCS	00-8448-00-102-00-001- 0-07-00	584000	UPHCS-PROCUREMENT OF DRUG		
20180100004325	22285	UPHCS	UDB	Raigunj-l	13	Chairman, Raigani	22210	UPHCS	0-8448-00-102-00-001- 0-07-00	432000	UPHCS-PROCUREMENT OF DRUG		

Pay Rs. 1384000 Rupees(in words) Thirteen Lakh Eighty Four Thousand only as transfer.

Signature of PL/LF/PF/OD Operator

Signature of Joint Signatory

Printed By: DEBARATI DATTA GUPTA

Regin Philips Description of Arrest

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Name: Operator Code: 19

DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-013-0-23-00

Reference Number :

20180100004324

Net Amount:

Reference Date :

28/01/2019

Reference Generated

Status:

2		No SI
-		<u> </u>
22285	22285	Scheme Id
UPHCS	UPHCS	Scheme Description
NAC	NAC	Payee Treasury Code
Kalyani	Kalyani	Payee Treasury Name
17	13	Payee Operator Code
CHAIRMAN, GAYESHPUR	CHAIRMAN, KALYANI	Payee Operator Name
22074	22074	Payee Scheme id
UPHCS	UPHCS	Payee Scheme Description
292000	76000	Amount
UPHCS- PROCUREMENT OF	UPHCS- PROCUREMENT OF	Purpose



Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 4:07 PM

State Urban Dayad promot Agrees

Signature of Joint Signatory

PAO-III

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code:

Operator Name:

DIRECTOR, SUDA

Net Amount:

584000

Head of Account: 00-8448-00-120-00-013-0-23-00

Reference Date : Reference Number: 20180100004325

28/01/2019

Reference Generated

Status:

_	No.		
22285	Scheme ld		
UPHCS	Scheme Description		
MIF	Payee Treasury Code		
Kharagpur	Payee Treasury Name		
<u></u>	Payee Operator Code		
CHAIRMAN KHARAGPUR	Payee Operator Name		
22379	Payee Scheme id		
UPHCS	Payee Scheme Description		
584000	Amount		
UPHCS- PROCUREMENT OF	Purpose		

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 4:08 PM

Mark Orban Development & maps Divercina

Signature of Joint Signatory

PAO-III

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-013-0-23-00

Operator Code:

Operator Name: DIRECTOR, SUDA

20180100004326

Net Amount:

432000

Reference Number:

Reference Date: 28/01/2019

Reference Generated

Status:

٦	No.		
22285	Scheme Id		
UPHCS	Scheme Description		
UDB	Treasury Code		
Raigunj-l	Payee Treasury Name		
ಪ	Payee Operator Code		
Chairman, Raiganj Municipality -LF A/C	Payee Operator Name		
22210	Payee Scheme Id		
UPHCS	Payee Scheme Description		
432000	Amount		
UPHCS- PROCUREMENT OF	Purpose		

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 28/01/2019 4:09 PM

Director

Signature of Joint Signatory



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No.	SUDA-Health	/504(Pt.	-I)/08/170
---------	-------------	----------	------------

Date22:09.2011

THU

From: Director, SUDA

To : The Mayor / Chairman

...... Municipal Corporation / Municipality

Sub.: Procurement of Drug under IPP-VIII, IPP-VIII (Extn.) and RCH Sub-Project, Asansol.

Sir,

You are requested to furnish the information relating to procurement of drug for HAU / HP, intermity Home (16) & ESOPD under iPP-ViiI, IPP-ViiI (Extr.) and RCPLSub-Project. Assured as per proforma given below by 24.10.2011:

Head of Account	Annual Plan 2011-12	Annual Plan 2012-13 Proposed outlay	
Account	Agreed Outlay	Anticipated Expenditure	
	1) @ Rs. 38,000/- per HAU / HP per quarter		
Drug	2) @ Rs. 70,000/- per MH per quarter		
	3) @ Rs. 70,000/- per ESOPD per quarter		72 8

N.B.: Serial No. 2 & 3 under column "Agreed Outlay" will be applicable for the ULBs having sanctioned & functioning MH, ESOPD under the above mentioned Health Schemes.

Thanking you.

Yours faithfully

incecine, Suità

Tei/Fax No.: 359-3184

Government of West Bengal
Health & Family Welfare Department
Swasthya Bhavan, 'B' Wing (4th Floor)
GN-29. Sector V, Salt Lake, Bidhannagar, Kolkata-700 091.
Phone: 033-2357 3625 Fax: 2357 7909

e-mail: mdnrhm/a wbhealth.gov.in/cfw/a/wbhealth.gov.in

Memo No. HFW/NUHM-241/2015/1585

From : Sanghamitra Ghosh

Mission Director, NHM. Health and Family Welfare Department, Government of West Bengal.

To : 1. Director State Urban Development Agency & Ex-officio Jt. Secretary Govt. of West Bengal Department of Municipal Affairs

2. The Chief Medical Officer of Health (All district)

Sir.

In response to several requests from different Municipalities/Municipal Corporations for procuring medicine from Fair Price Shop (FPS), I am to inform you that the ULBs may purchase emergency medicine for the urban health facilities utilising 20% of fund allotted for drugs and equipment from these FPSs. The ULBs will have to observe the Government financial rules and procurement procedures as follows.

- 1. Order can be placed maximum for 10000.00 (ten thousand) at one time.
- A certificate will have to be issued with each and every requisition declaring that the medicine
 will be utilised for the patients attending the Health facilities under NUHM and will be
 distributed free of cost.

You are requested to communicate the matter to concerned ULBs.

Yours faithfully

Date: 15.05.2015

(Sanghamitra Ghosh)

Date: 15.05.2015

Memo No. HFW/NUHM-241/2015/1585

Copy forwarded to:

- The Secretary (PPP)
 Department of Health and Family Welfare, West Bengal, for kind information and necessary
 action.
- 2. IT Cell for web posting

(Sanghamitra Ghosh)



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091

West Bengal

Ref No. SUDA-Health/540/10/240 (GV) Date 24.09.2010

From: Director, SUDA

To: The Chairman

Sub.: Purchase of Medicines under Community Based Primary Health Care Services (CBPHCS) in 63 Non-KMA ULBs.

Sir / Madam,

As per instruction of Dept. of Health & Family welfare, procurement of medicine for CBPHCS is to be done as per approved drug list through CMS approved firm at CMS approved price through Procurement Committee already constituted for the purpose at you ULB.

This is for your information and necessary action.

Thanking you.

Yours faithfully,

Director, SUDA

Tel/Fax No.: 359-3184



রাজ্য নগর উন্নয়ন সংস্থা



STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ "ILGUS BHAVAN", H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

	SUDA-Health/501	PtII/08/117(03)
ত্রু প্রক শং		

11.09.2018 তারিখ

MEMORANDUM

Funds are hereby released electronically in favour of Urban Local Bodies towards Procurement of Drug from CMS approved Firm/s and at CMS approved rate upto the month of Sepetember, 2018 as per details shown in the following page for implementation of Urban Primary Health Care Services (UPHCS).

Statement of Expenditure (SOE) and Utilization (UC) may please be sent immediately after the cumulative funds on this component released in your favour is utilized.

Enclo. : As stated.

Yours faithfully,

Finance Officer, SUDA

H. V. etter Head L. L. Bs(2)_1st quarter, 2011-12 doc

Tel: 2358 6403/5767, Fax: 2358 5800, E-mail: wbsudadir@gmail.com

Account Section: 2358 6408

POS-IPP-VIJEXT, RCHASL May be whifer an

Proceedings of the 1st. meeting of the Apex Advisory Committee on Urban Health Improvement Programmes under KMDA held on 20th November, 2002 at 1 PM in the VIP Conference Room, Unnayan Bhavan, Bidhan Nagar, Kolkata-7000 91.

The Municipal Affairs Department of the Government of West Bengal constituted an Apex Advisory Committee for supervision and monitoring of various Urban Health Improvement Programmes like CUDP-III, CSIP, IPP-VIII, IPP-VIII (Extension), RCH etc. vide Government Order No. 2311/MA/C-10/1G-7/2002 dated November 8, 2002.

The 1st meeting of the Apex Advisory Committee as constituted above was held at the VIP Conference Room, Unnayan Bhavan, Bidhan Nagar, Kolkata –7000 91 at 1 PM on 20th November, 2002.

MEMBERS PRESENT:

1. 2.	Smt. Anju Kar, Minister of State, MA Deptt. Principal Secretary, U.D. Deptt.represented	Chairperson
3. 4. 5.	by Shri Swapan Chattopadhyay, Dy. Secretary. Secretary, M.A. Deptt. Shri Prabh Das, Chief Executive Officer, KMDA Shri Mrinalendu Bandopadhyay,	Member -do- -do-
6.	Chairman, New Barrackpore Municipality. Shri Sujit Ghosh, Chief Health Officer, Kolkata Municipal Corporation	-do-
7. 8. 9.	Shri D.K. Roy, Manager, CMU, SUDA Shri Gopal Baneriee Director SUDA	-do- Special Invitee
10. 11.	Dr. N.G. Gangopadhyaya, Advisor (Health), SUDA Dr. B. Bhattacharjee, Chief of Health, IPP-VIII, Kolkata Ms. Roshni Sen, Special Secretary, KMDA	Member -do- Member- Secretary
	771	- Secretary

The meeting was chaired by Smt. Anju Kar, Minister of State, Municipal Affairs Department, Government of West Bengal.

Welcoming the members present in the meeting, the MOS stressed on the necessity for adopting suitable policy guidelines for sustaining the various activities under the Urban Health Improvement Programmes which had entered the Post Project Maintenance Period.

The Members unanimously agreed that the activities under the Urban Health Improvement Programme should be efficiently sustained with quality care by the concerned urban local bodies under the overall supervision of KMDA to cater to the health needs of the community.

Smt. Roshni Sen, Member-Secretary with the permission of the chair, placed before the Committee the item wise agenda for consideration.

The Committee discussed the agenda item-wise in detail and resolved as follows:-

Agenda Item No-1: Decentralisation of authority to the local bodies in the matter of running the facilities created under various Urban Health Improvement Programmes.

Taking part in the discussion, the members present expressed the view that decentralized management at the Urban Local Body level should continue on a sustainable basis during the Post Project Period with optimum utilisation of existing facilities already created.

Shri D. Mukhopadhyay, Secretary, MA Department, Government of West Bengal observed that all the facilities created under IPP-VIII (Extension) should be made fully functional by March, 2003. A month wise performance report for all the 10(ten) projects be submitted in the Apex Committee meeting to be held in March, 2003.

The requirement of minimum number of staff at KMDA Head Quarters for supervision and monitoring, financial management of the activities of the Urban Health Improvement Programmes during the Post Project Period including implementation of the externally assisted UHIP (EC assisted) was also discussed in detail and it was decided that 15(fifteen) Technical Posts (out of 23 already decided in the meeting on 7.10.2002, presided over by the MIC, UD & MA Deptt., Govt. of West Bengal) may be retained on existing contractual basis with effect from 1st November, 2002 to 31st. March, 2003. The salaries payable for retention of the above technical staff should be met from funds available for EC assisted Urban Health Improvement Programme being implemented by

After detailed deliberations, it was further resolved that :-

MIES System is to be strengthened in order to develop report on physical and financial progress of the activities municipality-wise upto March, 2003 and place the same before the next Apex Committee Meeting.

Director, SUDA may be inducted as a member of the Apex Advisory Committee

Agenda Item No-2: Mobilisation of local resources to run the health facilities on a self

Agenda Item No.-6: Rationalisation of user fees to be levied on beneficiaries and nonbeneficiaries for generation of local resource towards maintenance of health programmes.

These two agenda items being inter-related were taken up together and thoroughly discussed by the members.

MOS emphasised that due to financial stringency and as per policy decision already taken by the State Government, the Urban Local Bodies running the health programmes in the Post Project Period should empahsise on generation of local resources to make the programmes progressively self reliant. Such generation of local resources should be ensured mainly through realisation of user charges and also through donations, fees

sharing of services by Public Private Partnership and accessing the development funds of MPs and MLAs and other viable means.

Secretary, MA Deptt. observed that a health fund should be created by all participating municipalities with user fees and other resources generated for the purpose plus apportionment of a part of the NSDP (National Slum Development Project) Fund upto 5 times of the user fees realised from the community.

Chief Executive Officer, KMDA also stressed the need for creation of the Health Fund in all the municipalities including those covered by IPP-VIII (Extension).

Continuing the discussion, the members took up the issue of revision of existing rates of service charges to be realised from beneficiaries as well as from the non-beneficiaries as proposed in the Agenda Item No. 6. It was agreed that the revised rates for service charges for beneficiaries as decided in the meeting should be uniformly applied to all the Local Bodies implementing the Urban Health Improvement Programmes. The revised charges for non-beneficiaries should be fixed by the Urban Local Bodies in consideration of local conditions subject to the minimum charges as prescribed by the Committee.

Special Secretary, KMDA suggested that for home visits by the Honorary Health Workers, fees should be collected @ Re. 1/- only for every fortnight. This would ensure their visits twice a month as well as collection of Rs. 2/- per month from each beneficiary family. This charge of home visits should be realised by all the local bodies if not already introduced.

After threadbare discussion on the above issues, the Committee resolved that :-

- User fees for services extended to the beneficiaries and non-beneficiaries and fees for home visits should be realised as per rate indicated in the Annexure –I.
- The difficulties experienced by the Kolkata Municipal Corporation in the matter of introduction of user fees should be sorted out separately.

Agenda Item No. 3- Procurement of drugs, medicine and equipment.

The Committee considered the agenda notes for procurement of drugs, medicine, equipment and furniture for maintenance of the activities during the Post Project Period.

The members of the Committee were of the view that in keeping with the policy of decentralization of authority at the field level, the urban local bodies should be entrusted with the responsibility of procurement of drugs, medicines and equipment etc. locally after observing the usual financial norms as per guidelines issued by KMDA.

It was also decided that a minimum of Rs. 1.00 crore would be necessary to procure drugs/medicine for the current financial year for running the existing health facilities. The M.A. Deptt., Government of West Bengal may be requested to release the funds at the disposal of KMDA.

Agenda Item No. 4: Optimum utilisation of the facilities created and their

The Committee discussed the agenda note for extension of additional services by strengthening the existing infrastructure under IPP-VIII under the U.H.I.P. with EC

It was resolved that -

• Additional services by utilisation of existing infrastructure, as proposed in the agenda may be extended for optimum utilisation of the facilities.

Agenda Item No. 5: Maintenance of buildings and equipments.

Maintenance of buildings: 58 buildings (HAU-50 & ESOPD-8) under CUDP-III which were constructed 10 years back being in a bad state of repairs require immediate attention to prevent further deterioration.

It was decided that minor repairs may be taken care of by the concerned U.L. Bodies from their own resources. The major repair works estimated at Rs. 33.33 lakhs may be undertaken by the municipalities from the fund provided for by the U.D. Department of

2. Maintenance of equipments: Preventive maintenance of sophisticated and costly equipments beyond the warranty period was felt necessary to keep the same in

Accordingly the Committee decided to ensure preventive maintenance of the same by the local bodies after observing the financial norms. The estimated cost for the same is Rs. 33.85 lakhs (5% of Rs. 6.77 crores) which has already been included in the current year's budget of Rs. 51.00 lakhs. MA Deptt. may be moved for immediate release of

Concluding the discussion the Minister of State, MA Deptt., Govt. of West Bengal and Chairperson of the Committee made the following observations for guidance of the

- The new setup for overall supervision and monitoring of the activities of the Urban Health Improvement Programmes will be under the administrative control of KMDA.
- Regular meeting/ workshops with the Health functionaries at the field level should be periodically organised by KMDA to motivate as well as to upgrade skills of such
- Health Officers/ Asstt. Health Officers should be engaged for supervising the activities under the programmes, wherever such posts are lying vacant.
- For better management and coordination of the health activities one Urban Health Improvement Organiser having adequate experience in administrative and financial management should be engaged at the ULB level on monthly remuneration of Rs.

4,500/- which should be equally shared by the ULB and the State Govt. as already decided in the meeting held on 7th October, 2002.

 Every attempt should be made to effect economy in maintaining the programmes without compromising with the quality and to ensure that the financial responsibility ultimately devolves on the local bodies.

There being no other items for discussion, the meeting ended with a vote of thanks to the Chair.

A si kan

(Smt. Anju Kar)
MOS, MA Deptt.
Chairperson, Apey Advisory Co

Chairperson, Apex Advisory Committee for Urban Health Improvement Programmes No. 311(13)/FW(45)/KMDN/1PP+11/M-29/02, Dated: 27.12.2002,

Copy forwarded for information to: -

- 1. Principal Secretary, U.D. Deptt. represented by Shri Swapan Chattapadhyay, Dy.
- 2. Principal Secretary Health & Family Welfare, Govt. of West Bengal.
- 4. Shri Prabh Das, Chief Executive Officer, KMDA

5. Mayor, Durgapur Municipal Corporation.

- 6. Shri Mrinalendu Bandapadhyay, Chairman, New Barrackpore Municipality.
- 7. Shri Sujit Ghosh, Chief Health Officer, Kolkata Municipal Corporation 8. Shri D.K. Roy, Manager, CMU, SUDA

9. Shri Gopal Banerjee, Director, SUDA

- 10. Dr. N.G. Gangopadhyaya, Advisor(Health), SUDA
 - 11.Dr. B.Bhattacharjee, Chief of Health, IPP-VIII, Kolkata
- 12. P.S. to the MIC, UD & MA Deptt., Govt. of West Bengal. 13. P.S. to the MOS, MA Deptt., Govt. of West Bengal.

(Smt. Roshni Sen)

Special Secretary, KMDA & Member-Secretary Apex Advisory Committee for UHIP



Sub. : Agenda Item No.-I : Follow up action in respect of observations of Shri D. Mukhopadhaya, Secretary, M.A. Deptt. of Govt. of West Bengal.

'All facilities created under IPP-VIII (Extension) should be made fully functional by March, 2003. A month wise performance report for all the 10(ten) Projects be submitted in the Apex Advisory Committee meeting to be held in March, 2003'.

Attention is drawn to the proceedings of the first Apex Advisory Committee meeting on Urban Health Improvement Programme held on 20.11.2002. He is requested kindly to take necessary action in the matter so that the report may be put up before the Apex Advisory Committee in its next meeting.

Chief of Health
IPP-VIII, KMDA 8/1/2003

N. G. Gangapadhyaya Advisor (Health), SUDA.

J.O.M: - 346/KMDA/1PP 8/03 d+ . 8-1-03

3 JAN 2003

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STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Ref No.		SUDA-Health/540/10/84(52)	Date	13.07.2012
From	*	Director, SUDA		
To	:	The Mayor		
		The Chairman		
		Municipality		

Sub.: Revised approved Drug list of Department of Health & FW for use under Urban Primary Health Care Service [i.e. CUDP III, CSIP, IPP-VIII, IPP-VIII (Extn.) and RCH Sub-Project].

Sir / Madam,

Enclosed kindly find herewith communication of the Asstt. Secretary, Department of Health & FW vide no. H/TDE/23/M-17/11 dt. 06.01.2012 along with list of medicines which may also be used by the Doctors for the cases where deemed fit under Urban Primary Health Care Service.

This is to mention here that fund allotment for Drug per ULB and the procurement process will remain unaltered.

Thanking you.

Yours faithfully,

Enclo.: As stated.

Director, SUDA

Tel/Fax No.: 359-3184



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

Het No.	"SUDA=Health/540/10/304	(73)
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Date09:02:2012

From: Director, SUDA

To : The Chairman

...... Municipality

Sub. : Revised approved Drug list of Department of Health & FW for use under CBPHCS and HHW Scheme.

Sir,

Enclosed kindly find herewith communication of the Asstt. Secretary, Department of Health & FW vide no. H/TDE/23/M-17/11 dt. 06.01.2012 along with list of medicines which may be used by the Doctors for the cases where deemed fit under CBPHCS and HHW Scheme.

This is to mention here that fund allotment for Drug per ULB and the procurement process will remain unaltered.

Thanking you.

SUDA-Health/540/10/304(73)/1(1)

Yours faithfully,

Enclo.: As stated.

Director, SUDA

Dt. .. 09.02.2012

CC

Shri B.C. Patra, Jt. Secretary, Department of Municipal Affairs — with reference to his letter no. 76/MA/C-10/3S-24/2011 dt. 30.01.2012.

Director, SUDA

D Dr. Guswami/RCH-63 ULBs/Letter Head ULBs(2) doc

Tel/Fax No.: 359-3184





7 JAN 2012 Government of West Benga: Department of Health & Family Wellard TDE Branch "Swasthya Bhawan" GN - 29, Sector - V, Salt Lake City. Kolkata - 700 09's. Dated, Kolkata, the 6th January, 2012. No. H/TDE/23/M-17/11 From : The Assistant Secretary to the Covernment of West Bengal. : The joint Secretary to the Govt, of West Bengal. Municipal Affairs Department. Writers' Buildings, Kelkata - 700 001. List of Medicines used for PHC and Opedatist OPD under CBPHCS and HHW Sub 6 M 3 M With reference to this latter no 825/8/a/C-10/35-24/2011 dated 15/12/2011 on the above meabored subject the undersigned is directed to send nerewith the list of desired drugs Engly, is Stated. Assistant Secretary Dated, Kolkata, the 6th January, 2012. Ho. H. IDE 23/M-17/11/1(1) Copy forwarded to Joint Secretary (Urban Health), Swasthya Bhawan. Assistant Secretary 44-17- Me 180)

20/2019

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14 (9)

LIST OF MEDICINES USED FOR PHC AND SPECIALIST OPD

Serial No.	Name of Medicine
1.	BCG Vaccine
2.	DPT Vaccine
3.	DT Vaccine
4.	Hepatitis B Vaccine recombinant (child-10mcg antigen per dose)
5.	Measles Vaccine
6.	OPV Vaccine
7.	Tetanus Toxoid
8.	Diliuent for BCG Vaccine
9.	Diluent for measles vaccine
10.	Antacid tab chwableAl-hydroxide250 mg+Nig-Hydroxide 250mg) •
11.	Famotidine Tab 40mcg -
12.	Omeprazole cap (EC pellets) 20mcg
13.	Rantidine Inj.50mg/2ml
14.	Aspirin Tab 300 mg/325 mg Chewable
15.	Diclofenac Tab EC -50mg
16	Diclofenac Inj 75 mg /3ml
17	Ibuprofen Tab 400 mg
18.	buprofen Susp 100mg/5ml
19.	Paracetamol Susp 125mg/5ml
20.	Pantazocine inj30mg/ml
21.	Paracetamol tab500mg
22.	Lignocaine Inj 2% without Agrenaline
23.	Lignocaine Inj 2% with Adrenaline 1:2000
24.	Lignocaine Gel 2%
25.	Cetrizine Tab 10mg
26.	Promethazine hydrochloride inj 25 mg/ml
27.	Salbutamol Tab 4 mg
28.	Salbutamol Syrup 2 mg/5ml
29.	Salbutamol Nebulizing solution 5 mg/mi
	The state of the s
30.	Theophyline +Etophyline Inj.25.3mg+84.7 mg/ml
31.	Glipzide Tab 5 mg
32.	Metformin Tab 500mg
33.	Domperidone Tab 10 mg
34.	Ondansetron Inj. 2 mg/ml
35.	Amlodipine Tab 5 mg
35.	Atenolol Tab 50 mg
37.	Frusemide Tab 40mg.
38.	Insorbide dinitrate tab 5 mg Sublingual
39.	Nifedipine Cap 10 mg Soft gelatin type
40.	Azitromycin Susp 200mg/5ml
41.	Azithromycin Tab 500mg
42.	Cefalexin Tab 250 mg Dispersible
43.	Cefixime Tab 200mg
44.	Cefotaxime Inj. 250 mg
45.	! Cefotaxime Inj. 500 mg

UST OF MEDICINES USED FOR FHC AND SPECIALIST OPD

	Name of Medicine
C	Ceftriaxone ir.j. 250 mg
6.	Ceftriaxone Inj 1 g
7	and the same of th
	Ciprofloxacin Tab 500 mg
9.	Co-trimoxazole Susp 240 mg/5ml
0.	Co-trimoxazcie Susp 960 m ₆
1.	Doxycycline Tab500mg
2.	Erythromycin Tab 500mg
3.	Gentamicin Inj .80mg/2 mi
4.	Ivermectin tab 3mg
5.	Metronidazole Susp 200 mg/5mi
16.	Metronidazole tab 400 mg
57.	Norf'oxacin tab 400 mg
8.	Fluconazole Tab 150 mg
59.	Miconazole Cream 2%(as nitrate)
50.	Chloroquine phosphate tab 250 mg
51.	Primaquine phosphate tab 7.5 mg base
52.	Aibendazole tab 400 mg chewable
	Glutaraldehyde Liquid 2%
53.	Povidone lodine Oint 5%
54.	Povidone lodine Lotion 5%
55.	Soapy solution of cresol [Lysol]
56.	Sodium hypochlorite Solution 5% [Bleach]
57.	
58.	Surgical spirit [Rectified spirit]
59.	IV fluid -Sodium chloride 0.9% [Normal Saline]
70.	iV fluid -Dextrose 5%
71.	Oral rehydration salts powder [for reconstitution of low osmolality CRS]
72.	Levonorgestrel tab 750 mg
73.	Ferrous sulfate + Folic acid tab 200mg + 500 mcg
74.	Vitamin A liquid [Oral oil] 100000U/m
75.	Vitamin B compound tab for adult therapeutic use
76.	Adrenaline inj 1 mg/ml [1 in 1000]
77.	Alprazolam tab 0.5 mg
78.	Atropine sulfate Inj 600 mcg/mi
79.	Ciprofloxacin Eye drop 0.3%
80.	Dexamethasone Inj 4 mg/ml[as sodium phosphate]
81.	Diazepam Inj 5mg/ml
82.	Dicyclomine tab 20 mg
83.	Hydrocortisone Inj 100 mg[as sodium succinate]
	Prednisolone Tab 20 mg
84.	Water for injection 5 ml (plastic vial)
85.	Zinc acetate Susp (20 mg elemental zinc/5m²)
86.	Gamma Benzene Hexachloride 1%
87.	Camana Hanzana Hayaciii (**)

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			Fruse	Amlodipine 1ab 50 mg		Ondansetron Inj 2 mg / ml	Tab 10 mg	Metformin Tab 500 mg	clinizide Tab 5 mg	F	Theophylline + Etophylline Inj 25.3 mg + or	lbutar	Salbutamol Syr 2 mg / 5 mL	Calburtamol Tab 4 mg	promethazine hydrochio we and	Cetinizine Tab 10 mg		Nitrous oxide -	penta	Neostigmine Inj 0.5 mg / vial to	Vecuronium Inj 2 mg / mL	Succinylcholine Inj 50 mg / mL - 10 inc and	Lignocaline Gel 2%	Lignocaine In 2% with Adrenaline 1:200000		Pantazocine Inj 30 mg/ mm	Paracetamol Susp 125 mg / onic	Paracetarnol Tab 500 mg	Thursten Susp 100 mg / 5 mL	Dicioreilac and 400 mg	Diclorenac Tab EC 30 mg / 3 mL	Aspirin Tab 300 mg / 325 mg		Omeprazole Cap (EC pellets) +0 113	Famotidine Tab 40 mg		,
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5	:V fluid - Sodium chloride 0.9% [Normal saline]	Surgical spirit [Rectified spirit]	Sodium hypochlorite Solution 5% [Bleach]	Soapy solution of cresol [Lysol]	Povidone lotion 5%	Povidone iodine Oint 5%	Glutaraidehyde Liquid 2%	Albendazole Tab 400 mg Cnewabie	Artemether + Lumerandine lab 40 mg + 240 mg	Artemether in 150 mg / 2 mb 340 mg	Primaquine phosphate lab /.5 mg daxe	Chloroquine phosphate Tab 250 mg	Miconazole Cream 2% (as nitrate)	Fluconazole Tab 150 mg	Norfloxacin Tab 400 mg	Metronidazole Tab 400 mg	Metronidazole Susp 200 mg / 5 mL	Ivermectin Tab 3 mg	Gentamicin Inj 80 mg / 2 mL	Erythromycin Tab 500 mg (as stearate)	Doxycycline Tab 100 mg	Co-trimoxazole Tab 960 mg	Co-trimoxazore susp 240 mg / 3 min	Ciprofloxacin 180 500 mg	Cettriaxone Inj 1 9	Cettriaxone Inj 250 mg	Cefotaxime Inj 500 mg	Cefotaxime inj 250 ing	Celixime 1ab 200 119	Cetalexin I do 200 mg Dispersions	Azithromycin i ab boo nig	Azithromycin Susp 200 ing / 5 ml	Misabus Cab To 118 Act Actions of the				
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• STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091 West Bengal

SUDA-Health/501(Pt.II)/08/156(17)

Date08.01.2019

Ref No.

From: Jt. Director, SUDA

To

: The Chairman / Chairperson

Baranagar / Barrackpore / Baruipur / Burdwan / Darjeeling / Kamarhati / Kanchrapara / Khardah / Maheshtala / North Dum Dum / Rajpur Sonarpur / Rishra / South Dum Dum / Titagarh / Uluberia Municipality

: The Commissioner

Bidhannagar / Howrah Municipal Corporation

Sub.: Request for submission of Statement of Expenditure (SOE) and Utilisation Certificate (UC) relating to fund released for procurement of drug for implementation of UPHCS.

Sir / Madam,

Enclosed kindly find herewith ULB-wise balance relating to fund released for procurement of Drug under UPHCS.

You are requested to submit SOE and UC as detailed in the enclosure by 11.01.2019, for facilitating further release of fund from this end.

This may be treated as most urgent.

Thanking you.

Yours faithfully,

Enclo. : As stated.

Jt. Director, SUDA

SUDA-Health/501(Pt.II)/08/156(17)/1(17)

Dt. .. 08.01.2019

CC

The Executive Officer, Municipality

Jt. Director, SUDA

To

Tel/Fax No.: 359-3184

Memo No. .. SUDA-Health/501(Pt.II)/08/156(17) dt. 08.01.2019

Unspent fund lying under the head Procurement of Drug under UPHCS

Sl. No.	ULBs	Amount in Rs.
1	Baranagar	3,35,132
2	Barrackpore	5,08,000
3	Baruipur	1,41,190
4	Bidhannagar MC	1,52,000
4	Bidhannagar MC (Rajarhat Gopalpur)	5,96,000
5	Burdwan	4,09,253
6	Darjeeling	4,37,887
7	Howrah MC	31,52,059
8	Kamarhati	3,04,000
9	Kanchrapara	5,26,163
10	Khardah	2,93,801
11	Maheshtala	5,86,126
12	North Dum Dum	8,76,297
13	Rajpur Sonarpur	19,07,950
14	Rishra	2,92,000
15	South Dum Dum	7,36,000
16	Titagarh	5,08,000
17	Uluberia	8,00,824

T. R. FORM NO. 31 [See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197]

Grant-in-aid Bill/Consolidated Grant-in-aid Bill



20181206056982

Harris Of the Office						
D.D.O.Code CA	AFUDA002	Bill No.	SUDA-117/2018-19 Dat	te: 05/12/2018		
Token No.	Date :	T.V. No.	Dat	te:		
Head Of Account	Code 72-2217-05-192-00-01	9-V-31-02				
Gross Amount: Rs		Net Amount: Rs. 0	By-Transfer: Rs.	NIL	PL Transfer: Rs.	22886000
Sanctioned by:	SPL SECRETARY, U DEPT.	D & MA Sanction No. & Date:	366(SANC.)/MA/P/C-10/3S	-38/12 (PTli) - 0	3-Dec-2018 (Copy enclosed)
Sanctioned Amour	nt (Rs): 22886000	period From : 01/04/201	8 period To : 31/03/2019	Purpose : IMPLE CARE	MENTATION OF URBAN F SERVICES IN URBAN WE	RIMARY HEALTH
Name of the Gran	ntee Institution					Amount (Rs.)
Total Amount Rup	pees :					
Pay Rs. 0 Rupee	es (in words) NIL as per ben					
By-Transfer Credit	t Rs. NIL Rupees (in words)		D/OR			
SI No.	Head of Account	Description		BT Type		Amount (Rs.)
1	MIL	Atti				7 3110 3111 (173.)

PL Transfer Rs. 22886000 Rupees (in words) Two Crore Twenty Eight Lakh Eighty Six Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	22886000.00

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.

(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority,

(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.

(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master. Signature of the D.D.O.

Station: 20 Dated

Designation

Director

State Urban Development Agency

Foruse	in the	Treasury

Ref No: 20181206056982

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

AND/OR

PL Transfer Rs. 22886000 Rupees (in words) Two Crore Twenty Eight Lakh Eighty Six Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	22886000.00

Examined and Entered.

Accountant /J.A.O.

T.O./A.T.O./P.A.O./A.P.A.O.

For use in the Office of the Accountant General (Audit), West Bengal Admitted for Rs._ Objected to Rs. _ Reason of Objection_ Auditor S.O./A.A.O. Audit Officer

T. R. FORM NO. 7A [See G. O No. 6229-F(Y) Dt. 18/08/2015] By-Transfer Challan Form

Challan for PF/ LF/ PL/ By-Transfer Credit]

Name of the Treasury Office: -

Treasury Code :-

PAO-III

CAF



20181206056982

Ref No:

	DIRECTOR, SI	JDA				
D.D.O. Code :-	CAFUDA002					
Reference No. :-	201812060569	82				
Bill No. & Date:	SUDA-117/2018-19	05/12/2018	Gross Amount (Rs.): 2	2886000	Net Amount (Rs.):	0
Total PF/ LF/ PL	Amount in this Bill: Rs.	22886000	By-Transfe	er Credit Amount i	in this Bill: Rs.	
lead of Account Debite	d: - 72-2217-05-192	2-00-019-31-02-V				
y-Transfer Credit Rs.	Rupees (in words))	only as below			
Head of	Account Credited		Description		A	mount (Rs.)
PF/LF/PL-Transfer Cred	lit Rs. 22886000 Rupees (in words) Two Crore	AND/OR Twenty Eight Lakh Eighty Six Thou	usand only as be	Now:-	
Head of	Account Credited		Description		A	mount (Rs.)
	120-00-013-07-00-0	DIRECTOR, SU	DA			22886000
Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme	ID Schei	me Description
CAF						
Bill Clerk Station : ate : 05/12/2018	PAO-III	Accountant	DIRECTOR, SUDA	22285	1	Disbursing Officer Director Development Ag
Bill Clerk	PAO-III	Accountant	के न्यार	22285	1	Disbursing Officer
Bill Clerk Station : ate : 05/12/2018		Accountant	Jan to the second	22285	1	Disbursing Officer
Bill Clerk station : ate : 05/12/2018		Accountant	के न्यार	22285	1	Disbursing Officer
Bill Clerk Station : ate : 05/12/2018 ccepted and amount tracken No.		Accountant	For use at the Treasury	22285	1	Disbursing Officer
Bill Clerk Station: ate: 05/12/2018 ccepted and amount tracken No.		Accountant	For use at the Treasury	22285	1	Disbursing Officer
Bill Clerk Station : ate : 05/12/2018 ccepted and amount tracken No.		Accountant	For use at the Treasury Date: Date:	22285	1	Disbursing Officer
Bill Clerk Station : ate : 05/12/2018 ccepted and amount tracken No.	ansferred vide:	Accountant	For use at the Treasury Date: Date:	22285	State Urban	Disbursing Officer
Bill Clerk Station : ate : 05/12/2018 ccepted and amount tra sken No. V. No.: hallan No.	ansferred vide:	Accountant	For use at the Treasury Date: Date:		State Urban	Disbursing Officer Director Development Ag
Bill Clerk Station: ate: 05/12/2018 ccepted and amount tracken No. V. No.: hallan No. Accountant /J.A	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date: Date:		State Urban	Disbursing Officer Director Development Ag
Bill Clerk station : ate : 05/12/2018 ccepted and amount tracken No. V. No.: nallan No. Accountant /J.A.	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date: Date:		State Urban	Disbursing Officer Director Development Ag
Bill Clerk station : ate : 05/12/2018 ccepted and amount tracken No. V. No.: hallan No. Accountant /J.A. mitted Rs.	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date: Date:		State Urban	Disbursing Officer Director Development Ag
Bill Clerk Station : ate : 05/12/2018 ccepted and amount tra sken No. V. No.: hallan No.	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date: Date:		State Urban	Disbursing Officer Director Development Ag
Bill Clerk Station : ate : 05/12/2018 ccepted and amount transken No. V. No.: hallan No. Accountant /J.A	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date: Date:		State Urban	Disbursing Officer Director Development Ag

T. R. FORM NO. 31 [See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197]

Grant-in-aid Bill/Consolidated Grant-in-aid Bill



Ref No: 20181206056945

Name	of	the	Office	,

D.D.O.Code CAFUDA002

SUDA-116/2018-19 Bill No.

05/12/2018

Token No.

Date :

T.V. No.

Date: Date:

Head Of Account Code 72-2217-05-191-00-068-V-31-02

Gross Amount: Rs.	5193000	1100100	ount: Rs.	0	By-Transfer: Rs.	NIL	PL Transfer: Rs.	5193000
Sanctioned by:	SPL. SECRE DEPT.	TARY, UD & MA	Sanction No.	& Date:	366(SANC.)/MA/P/C-10/3S	-38/12 (PTII) - (3-Dec-2018 (Copy enclosed)
Sanctioned Amount (Rs):	5193000	period From	01/04/2018	period To : 31/03/2019		EMENTATION OF URBAN PE SERVICES IN URBAN WE	
Name of the Grantee	Institution							Amount (Rs.)
Total Amount Rupee	s:						,	

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND/OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

AND / OR

PL Transfer Rs. 5193000 Rupees (in words) Fifty One Lakh Ninety Three Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	5193000.00

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.

(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority,

(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.

(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master.

Station: Dated _20__ Signature of the D.D.O.

Designation

Director

State Urban Development Agency

Forus	se in	the T	Treasury
I UI U	30 111	ri io	I I Cabuly

Ref No: 20181206056945

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

SI No.	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

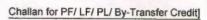
AND/OR

PL Transfer Rs. 5193000 Rupees (in words) Fifty One Lakh Ninety Three Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	5193000.00

Examined and Entered.		
Accountant /J.A.O.	T.O./A.T.O./P.A.O./A.P.A.O.	
	For use in the Office of the	Accountant General (Audit), West Bengal
Admitted for Rs		
Objected to Rs.		
Reason of Objection		
Auditor	S.O./A.A.O.	Audit Officer

T. R. FORM NO. 7A [See G. O No. 6229-F(Y) Dt. 18/08/2015] By-Transfer Challan Form



Name of the Treasury Office: - PAO-III

Treasury Code :-



20181206056945

Ref No:

D.D.O. Designation :-	DIRECTOR, SI	JDA				
D.D.O. Code :-	CAFUDA002					
Reference No. :-	201812060569	45				
Bill No. & Date:	SUDA-116/2018-19	05/12/2018	Gross Amount (Rs.):	5193000 Ne	t Amount (Rs.):	0
Total PF/ LF/ PL	Amount in this Bill: Rs.	5193000	By-Transfe	er Credit Amount in th	is Bill: Rs.	
lead of Account Debite	d: - 72-2217-05-19	1-00-068-31-02-V				60°
y-Transfer Credit Rs.	Rupees (in words)	only as below	v:-		
Head of Account Credited			Description			ount (Rs.)
					7411	Joint (Italy
PF/LF/PL-Transfer Cred	lit Rs. 5193000 Rupees (ii	n words) Fifty One Lai	AND/OR th Ninety Three Thousand only	as below:-		
Head of	Account Credited		Description		Amo	ount (Rs.)
		DIRECTOR, SUI				5193000
Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme	Description
CAF	PAO-III	19	DIRECTOR, SUDA	22285	11	PHCS
Bill Clerk station :		Accountant	ob 12-18	22200	Drawing & D	all
tation:			a Doni	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018		Accountant	a Doni	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount tra		Accountant	ob 12-18 For use at the Treasury	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount tracken No.		Accountant	For use at the Treasury	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount traken No.		Accountant	For use at the Treasury Date: Date:	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount tracken No.		Accountant	For use at the Treasury	22200	Drawing & D	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount traken No.	ansferred vide:	Accountant	For use at the Treasury Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer
tation : ate : 05/12/2018 ccepted and amount traken No. V. No.:	ansferred vide:	Accountant	For use at the Treasury Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen
tation : ate : 05/12/2018 ccepted and amount traken No. V. No.: hallan No. Accountant /J.	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen
tation : ate : 05/12/2018 ccepted and amount traken No. V. No.:	ansferred vide:	Accountant	For use at the Treasury Date: Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen
tation : ate : 05/12/2018 ccepted and amount tracken No. V. No.: nallan No. Accountant /J. mitted Rs.	ansferred vide: A.O. For use	Accountant	For use at the Treasury Date: Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen
tation : ate : 05/12/2018 ccepted and amount tracken No. V. No.: hallan No. Accountant /J./	ansferred vide: A.O. For use	Accountant	For use at the Treasury Date: Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen
tation : ate : 05/12/2018 ccepted and amount tracken No. V. No.: nallan No. Accountant /J. mitted Rs.	ansferred vide: A.O. For use	Accountant	For use at the Treasury Date: Date: Date:		Drawing & Dir Dir State Urban De	Soursing Officer Sector Evelopment Agen

GOVERNMENT OF WEST BENGAL



Tel:

Fax:

Memo No: 366(Sanction)/MA/P/C-10/3S-38/12 (Pt. II)

Date: 03/12/2018

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2018 - 2019

Sanctioning Authority: Urban Development and Municipal Affairs

- 2. Name of the Grantee Institution: State Urban Development Agency
- 3. Address of the Grantee Institution: ILGUS Bhavan, HC Block, Sector III, Salt Lake, Kolkata 700 106.
- 4. Category of Grantee Institution: Others
- 5. Amount Sanctioned: 28079000 (in words Rs. Two Crore Eighty Lakh Seventy Nine Thousand Only.)
- 6. Name of the DDO: DIRECTOR, SUDA
- 7. Department Code: UM-Urban Development and Municipal Affairs
- 8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III
- 9. Nature of Grant

- (a) Recurring or Non-recurring: Non-Recurring
- (b) Capital or Revenue: Revenue
- 10. Condition of Grant

Utilisation Certificate required: Yes

- 11. Category of Grant : Others
- 12. Purpose of Grant : Procurement of drugs for 50 ULBs under Urban Primary Health Care Services
- 13. An amount of Rs 28079000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head o account As Shown in the Annexure. from the budget provision of the financial year, 2018 2019 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code : As Shown in the Annexure.
- 15. Name of the Scheme : Urban Primary Health Care Service
- The amount will be drawn in T.R. from No.31.
- 17. The sanctioned amount will be payable to State Urban Development Agency by Transfer Credit to the Head of Account of the LF/PL/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.

18. Remarks: Fund is released for procurement of drugs for 50 ULBs under Urban Primary Health Care Services subject to strict observation of all relevant financial rules & regulations including e-tender rules of Govt., timely completion of work, non-deviation of allotted fund, submission of UC in due course and adherence to the online EMD receipt/refund as per FD Memo No. 3975-F(Y) dt.28.07.16 & 2365-F(Y) dt.12.04.18. This is issued with the concurrence of F.A. and approval of Pr. Secretary of this Deptt.

19. Total released amount is within the Budget Provision of the above mentioned head of account during 2018 - 2019

20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1872-F.B dated 26.03.2018with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

SPECIAL SECRETARY

Urban Development and Municipal Affairs



- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works &Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Deptt., Group N / R of this Govt.
- 7. Finance Officer, SUDA
- 8. F.A. of this Deptt.

SPECIAL SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

SI No.	Sub-Alloting Code / DDO Code Designation	Amount
1.	CAFUDA002-DIRECTOR, SUDA	28,079,000 00

28,079,000.00

SPECIAL SECRETARY

Urban Development and Municipal Affairs

Annexure of Memo No- 366(Sanction)/MA/P/C-10/3S-38/12 (Pt. II) Date- 03/12/2018

Allotment From Department - UM-Urban Development and Municipal Affairs to - CAFUDA002-DIRECTOR, SUDA

Treasury Name: PAO-III Pay & Accounts Office-III,

ID	Head of Account	Scheme Description	Object of Expenditure	Alloted Amount
432794	72-2217-05-191-068-31-02-V	Urban Primary Health Care Service	Other Grants	5193000
432795	72-2217-05- <u>192-</u> 019-31-02-V	Urban Primary Health Care Service	Other Grants	22886000

28,079,000.00

SPECIAL SECRETARY

Urban Development and Municipal Affairs



রাজ্য নগর উন্নয়ন সংস্থা STATE URBAN DEVELOPMENT AGENCY



"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ "ILGUS BHAVAN", H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-Health/501 Pt.-II/08/117(03)

11.09.2018 তারিখ

MEMORANDUM

Funds are hereby released electronically in favour of Urban Local Bodies towards Procurement of Drug from CMS approved Firm/s and at CMS approved rate upto the month of Sepetember, 2018 as per details shown in the following page for implementation of Urban Primary Health Care Services (UPHCS).

Statement of Expenditure (SOE) and Utilization (UC) may please be sent immediately after the cumulative funds on this component released in your favour is utilized.

Enclo.: As stated.

Finance Officer, SUDA

Yours faithfully,

H'\Letter Head ULBs(2)_1st quarter, 2011-12.doc

Tel: 2358 6403/5767, Fax: 2358 5800, E-mail: wbsudadir@gmail.com

Account Section: 2358 6408

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-	Garulla	00000	277	4	77277	Procurement of Drug
		596000		4	17077	* 1000000000000000000000000000000000000
1	Maricalitara			220	22518	Procurement of Urug
	77 11 77	2016000	CAC	239	01077	110000

Memo No. .. SUDA-Health/501 Pt.-II/08/117(03)/1(4)

Dt. .. 11.09.2018

CC

1. The Mayor / Chairman, Municipal Corporation / Municipality

2. The Project Officer, Health, SUDA

3. The Chief Public Health Officer, Health, SUDA

4. The Finance Officer, Health, SUDA

Finance Officer, SUDA

PAO THE

e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code: 19

Head of Account: 00-8448-00-120-00-020-0-23-00

Local Advice Date: 29/08/2018 Local Advice Id:

Memo No. :

Memo Date:

DIRECTOR, SUDA

Operator Designation:

29/08/2018 SUDA-HEALTH/501(PT.-II)

	PROCUREMENT OF DRUG	20160000 PRC	0-8448-00-102-00-001-	UPHCS	22518	Spl. Controller of Municipal	239	Calcutta PAO-II	CAC	UPHCS	22285	20180800002245
Approved Objected	Purpose App	Amount(Rs.)	Head of Account of the Payee Operator	Scheme Description of Payee Operator	Scheme Id of Payee Operator	Designation of Payee Operator	Operator [Code of Payee	Payee Treasury Name	Payee Treasury code	Scheme Description of Operator Operator	Scheme Id of Operator	Reference No.
					nt Operato	Details of Recipient Operator	Def			Details of Payee Operator	Details	
For use of Treasury/PAO	-					For use of the Operator	For use					

Pay Rs. 2016000 Rupees(in words) Twenty Lakh Sixteen Thousand only as transfer.

State Urban Development Agency Director

Assistant/Accountant

Printed By: DEVI PRASAD KARANAM

Signature of PL/LF/PF/OD Operator

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

2016000

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180800002245

Reference Date: 29/08/2018

Reference Generated

Status:

			_	
_	No.	S.		
22285		Scheme Id		
UPHCS	Description	Scheme		
CAC	Code	Treasury	Payee	
Calcutta PAO-II	Name	Treasury	Payee	
239		Code	Pavee Operator	
Municipal F&A ,K.M.	Controller of	Name	Payee Operator	
01077		Scheme Id	Payee	
	IPHCS		Payee Scheme Description	
	2016000		Amount	
	PROCUREMENT OF		Purpose	

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 29/08/2018 12:12 PM

Signature of Joint Signatory

State Urban Development Agency



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code:

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation:

DIRECTOR, SUDA

Local Advice Id :

116

Local Advice Date: 14/08/2018

Memo No. :

SUDA-HEALTH/501(PT-II)

Memo Date :

14/08/2018

					For use	of the Operato	0						ise of ry/PAO
	Details	s of Payee Operator			De	tails of Recipie	nt Operato	ır					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator		Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180800001965	22285	UPHCS	NPC	Barrackpore-	6	Chairman, Garulia	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	368000	PROCUREMENT OF MEDICINE FOR UPHCS		
20180800001966	22285	UPHCS	SPB	Allpore-II	4	CHAIRMAN MAHESHTALA	22324	UPHCS	00-8448-00-102-00-001- 0-07-00	596000	PROCUREMENT OF MEDICINE FOR UPHCS		

Pay Rs. 964000 Rupees(in words) Nine Lakh Sixty Four Thousand only as transfer.

Director Director State Urban Development Agency Signature of PL/LF/PF/OD Operator

Signature of Joint Signatory

Printed By: DEVI PRASAD KARANAM

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code:

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Name: Reference Number: DIRECTOR, SUDA

20180800001965

Net Amount:

368000

Reference Date:

14/08/2018

Reference Generated

Status:

22204		
	UPHCS	UPHCS 368000
Payee Scheme Id	Payee Scheme Description	Payee Scheme Description Amount

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 14/08/2018 12:30 PM

Signature of Joint Signatory

State Urban Development Agency Director

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

20180800001966

Net Amount:

596000

Reference Date: 14/08/2018 Reference Number:

Reference Generated

Status:

22324		
	UPHCS	UPHCS 596000
Payee P. Scheme Id	ayee Scheme Descriptio	Payee Scheme Description Amount

Signature of the Assistant/Accountant of 18

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 14/08/2018 12:32 PM

Signature of Joint Signatory

State Urban Development Agency Director /



রাজ্য নগর উন্নয়ন সংস্থা STATE URBAN DEVELOPMENT AGENCY



"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ "ILGUS BHAVAN", H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-Health/501 Pt.-III/16/81(40)

তারিখ02:08:2018

MEMORANDUM

Funds are hereby released electronically in favour of Urban Local Bodies towards Procurement of Drug from CMS approved Firm/s and at CMS approved rate upto the month of Sepetember, 2018 as per details shown in the following page for implementation of Urban Primary Health Care Services (UPHCS).

Statement of Expenditure (SOE) and Utilization (UC) may please be sent immediately after the cumulative funds on this component released in your favour is utilized.

Yours faithfully,

Enclo. : As stated.

Financial Adviser & Additional Director, SUDA

H:\Letter Head ULBs(2)_1st quarter, 2011-12.doc

Tel: 2358 6403/5767, Fax: 2358 5800, E-mail: wbsudadir@gmail.com

Account Section: 2358 6408

	29 Nor	28 New	27 Naihati		25 Kon		23 Kan	22 Kan	21 Kalyani	20 Hov	19 Hoo		_	16 Eng	15 Dur	14 Dun	13 Cha	12 Cha	11 Bud	10 Bidl Gop	Bid	9 Bha	8 Bha	7 Barr	6 Barr	5 Barasat	4 Bar	3 Ban	2 Balı	1 Bai	No.
	North Barrackpore	New Barrackpore	nati	Madhyamgram	Konnagar	Kharagpur	Kanchrapara	Kamarhati	/ani	Howrah MC	Hooghly Chinsurah	Halisahar	Gayeshpur	English Bazar	Durgapur MC	Dum Dum	Chandernagore MC	Champdany	Budge Budge	Bidhannagar MC (Rajarhat Gopalpur)	Bidhannagar MC	Bhatpara	Bhadreswar	Baruipur	Barrackpore	asat	Baranagar	Bansberia	Balurghat	Baidyabati	
	7,24,000	5,08,000	5,08,000	5,08,000	2,92,000	5,84,000	2,28,000	3,04,000	76,000	15,72,000	5,20,000	3,68,000	2,92,000	4,32,000	11,68,000	5,72,000	5,08,000	3,68,000	5,08,000	5,96,000	76,000	7,36,000	7,24,000	76,000	5,08,000	6,08,000	2,92,000	5,08,000	4,32,000	2,28,000	(In Rs.)
) Inc	NPC	NPC	NPC	NPA	HGF	MIF	NPC	NPC	NAC	HWB	HGB	NPC	NAC	MDB	BUE	NPC	HGD	HGD	SPB	NPG	NPG	NPC	HGD	SPD	NPC	NPA	NPC	HGB	DDA	HGF	Code
	13	12	1,1	13	16	1	9	00	13	27	8	7	17	2	12	5	4	6	2	50	50	4	5	11	2	00	_	9	13	12	Code of Payee
	22204	22204	22204	22094	22235	22379	22204	22204	22074	22331	22058	22204	22074	22044	22371	22204	22295	22295	22324	22432	22432	22204	22295	22349	22204	22094	22204	22058	22390	22235	Payee Operator
	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Procurement of Drug	Payee Operator																			

SI.	Name of ULB	Total Amount	Payee Treasury	Operator	Scheme ID of the	Scheme Description of
No.		(In Rs.)	Code	Code of Payee	Payee Operator	Payee Operator
31	Pujali	76,000	SPB	6	22324	Procurement of Drug
32	Raiganj	4,32,000	UDB	13	22210	Procurement of Drug
33	Rajpur Sonarpur	8,00,000	SPD	9	22349	Procurement of Drug
34	Rishra	2,92,000	HGF	14	22235	Procurement of Drug
35	Serampore	5,20,000	HGF	18	22235	Procurement of Drug
36	Siliguri MC	8,88,000	DAD	14	22257	Procurement of Drug
37	South Dum Dum	7,36,000	NPC	15	22204	Procurement of Drug
38	Titagarh	5,08,000	NPC	16	22204	Procurement of Drug
39	Uluberia	5,84,000	OWH	10	22173	Procurement of Drug
40	Uttarpara Kotrung	5,84,000	HGF	18	22235	Procurement of Drug

Memo No. .. SUDA-Health/501 Pt.-III/16/81(40)/1(4)

Ö

1. The Mayor / Chairman, Municipal Corporation / Municipality

- 2. The Project Officer, Health, SUDA
- 3. The Chief Public Health Officer, Health, SUDA
- 4. The Finance Officer, Health, SUDA

Dt. .. 02.08.2018

Financial Advisors Additional Director, SUDA



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code: 19

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation:

DIRECTOR, SUDA

Local Advice Date: 30/07/2018

Memo No.:

SUDA-HEALTH/501(PT-II)

Memo Date :

30/07/2018

					For use	of the Operato	r					For u	ry/PAO
	Details	of Payee Operator			Det	ails of Recipie	nt Operato	NF.					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator		Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001715	22285	UPHCS	SP8	Alipore-II	2	CHAIRMAN;8	22324	UPHCS	00-8448-60-102-00-001- 0-07-00	508000	UPHCS		

Pay Rs. 508000 Rupees(in words) Five Lakh Eight Thousand only as transfer.

State Urban Development Agency

Signature of Joint Signatory

Printed By: SUTANU PRASAD KAR

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: Operator Name:

DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number :

20180700001715

Net Amount :

Reference Date :

30/07/2018

Status:

Approved at Online PL/LF/PF/PD

SI. No.	Scheme Id	Scheme Description	Payee Treasury Code	Payee Treasury Name	Payee Operator Code	Payee Operator Name	Payee Scheme Id	Payee Scheme Description	Amount	Purpose
1	22285	UPHCS	SPB	Alipore-II	2	CHAIRMAN;BUDGE BUDGE	22324	UPHCS	508000	UPHCS

Director
State Urban Development Agency

Signature of the Assistant/Accountant

Printed By: SUTANU PRASAD KAR

Signature of the Administrator

Signature of Joint Signatory

Printed On: 30/07/2018 5:27 PM

e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code: 19

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation :

DIRECTOR, SUDA

Local Advice Id :

Memo No. :

SUDA-HEALTH/501(PT.II)

Local Advice Date : 30/07/2018

Memo Date :

30/07/2018

Annual Control of the					For use	of the Operato	r						ry/PAO
	Details	s of Payee Operator			De	tails of Recipie	nt Operato	r					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001640	22285	UPHCS	HGD	Chandernag	4	Mayor,Chande magor	22295	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001642	22285	UPHCS	NPC	Barrackpore-	5	Chairman, DumQum	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	572000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001643	22285	UPHCS	BUE	Durgepur	12	MAYOR D.M.C(LF)	22371	UPHCS	0-8448-00-102-00-001- 0-07-00	1168000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001645	22285	UPHCS	MDB	Maide-II	2	CHAIRMAN, ENGLISHBAZ	22044	UPHCS	00-8448-00-102-00-001- 0-07-00	432000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001646	22285	UPHCS	NAC	Kalyani	17	CHAIRMAN, GAYESHPUR	22074	UPHCS	00-8448-00-102-00-001- 0-07-00	292000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2972000 Rupees(in words) Twenty Nine Lakh Seventy Two Thousand only as transfer.

Signature of PL/LF/PF/OD Operating Urban Development Agency nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

508000

Operator Code: DIRECTOR, SUDA 19

Reference Number: 20180700001640 Net Amount:

Operator Name:

Reference Date: 27/07/2018

Status: Reference Generated

(8)

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 11:37 AM

State Urban Development Agency

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

572000

Operator Code: 19

DIRECTOR, SUDA

Operator Name:

Reference Number: 20180700001642

27/07/2018

Reference Date:

Status: Reference Generated

				Compliant		_		01.100	2227	_
DRUG FOR UPHCS	5/2000	UPHCS	22204	Municipality	(J)	Barrackpore	NPC	IIPHCS	28000	
PROCUREMENT OF				,						1
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury	Payee Treasury Code	Scheme Description	Scheme Id	S S

B

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 11:38 AM

State Urban Development Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

Operator Code: 19

DIRECTOR, SUDA

Operator Name: 20180700001643

Reference Number:

Reference Date: 27/07/2018

Reference Generated

Status:

_	No.					
22285	Scheme Id					
UPHCS	Scheme Description					
BUE	Payee Treasury Code					
Durgapur	Payee Treasury Name					
12	Payee Operator Code					
MAYOR D.M.C(LF)	Payee Operator Name					
22371	Payee Scheme Id					
UPHCS	Payee Scheme Description					
1168000	Amount					
DRUG FOR UPHCS	Purpose					

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 11:40 AM

State Urban Development Agency Signature of Joint Signatory

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Name: Operator Code: DIRECTOR, SUDA 19 Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number: 20180700001645 Net Amount:

432000

Reference Date: 27/07/2018

Status: Reference Generated

_	No.
22285	Scheme Id
UPHCS	Scheme Description
MDB	Payee Treasury Code
Malda-II	Payee Treasury Name
2	Payee Operator Code
CHAIRMAN, ENGLISHBAZAR	Payee Operator Name
22044	Payee Scheme Id
UPHCS	Payee Scheme Description
432000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

(10)

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:12 PM

State Urban Development Agency Signatur

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

292000

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001646

27/07/2018

Reference Date:

Status: Reference Generated

_	No.
22285	Scheme Id
UPHCS	Scheme Description
NAC	Payee Treasury Code
Kalyani	Payee Treasury Name
17	Payee Operator Code
CHAIRMAN, GAYESHPUR	Payee Operator Name
22074	Payee Scheme Id
UPHCS	Payee Scheme Description
292000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:14 PM

Signature of Joint Signatory

Page 1 of 1

State Urban Development Agency



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation:

DIRECTOR, SUDA

Local Advice Id :

Local Advice Date : 30/07/2018

Memo No. :

SUDA-HEALTH/501(PT.II)

Memo Date :

30/07/2018

			,		For use	of the Operato	•						ise of iry/PAO
	Detail	s of Payee Operator			De	tails of Recipie	nt Operato	r					
Reference No	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Schema Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001626	22285	UPHCS	HGF	Sreerampore II	12	CHAIRMAN, BAIDYABATI	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	228000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001628	22285	ЦРИС В	DDA	Belurghat-I	13	BALURGHAT MUNICIPALIT	22390	UPHCS	00-8448-00-102-00-001- 0-07-00	432000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001629	22285	UPHCS	HGB	Hooghly-II	9	CHAIRMAN BANSBERIA	22058	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001630	22285	UPHCS	NPC	Barrackpore-	1	Chairman,Bara nagar	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	292000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001631	22285	UPHCS	NPA	Beresat-I	8	CHAIRMAN, BARASAT	22094	UPHCS	00-8448-00-102-00-001- 0-07-00	608000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2068000 Rupees(in words) Twenty Lakh Sixty Eight Thousand only as transfer.

Signature of PULF/PF/OD Operator Urban Development Agents nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180700001626

Net Amount:

228000

Reference Date: 26/07/2018

Status: Reference Generated

CHAIRMAN, BAIDYABATI	22235	Ch.	UPHCS	HCS 228000
Payee Operator Code Payee Operator Name	Sch	Payee Scheme Id	ayee Payee Scheme Description	

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/07/2018 5:13 PM

State Urban Development Agency

Director

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

432000

Operator Code:

Operator Name: DIRECTOR, SUDA 20180700001628

Reference Number:

Reference Date: 26/07/2018

Reference Generated

Status:

	,	7 10
_		<u>S</u> S
22285		Scheme Id
UPHCS		Scheme Description
DDA		Payee Treasury Code
Balurghat-l		Payee Treasury
13		Payee Operator Code
MUNICIPALITY		Payee Operator Name
22390		Payee Scheme Id
UPHCS		Payee Scheme Description
432000		Amount
DRUG FOR UPHCS	PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/07/2018 5:15 PM

Signature of Joint Signatory

State Urban Development Agency Director

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

20180700001629

Reference Number:

Reference Date: 26/07/2018

Reference Generated

Status:

Net Amount:

508000

	NO.	<u>s</u>	
22285		Scheme Id	
UPHCS		Scheme	
HGB	0000	Payee Treasury	
Hooghly-II	1 accession	Payee Treasury Name	
9		Payee Operator Code	
BANSBERIA	CHAIRMAN	Payee Operator Name	
00077	2000	Payee Scheme Id	
	IIPHCS	Payee Scheme Description	
	508000	Amount	
	DRUG FOR UPHCS	Purpose	



Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency

Printed On: 26/07/2018 5:17 PM

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

292000

Operator Code:

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180700001630

Reference Date: 26/07/2018

Reference Generated

Status:

No.

				indianopany (/					11100	
DRUG FOR UPHCS	292000	UPHCS	22204	Chairman,Baranagar	ے	Barrackpore	NPC	UPHCS	22285	
BBOCHBEMENT OF										
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	o -

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency

Printed On: 26/07/2018 5:18 PM

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

608000

Operator Code: 19

DIRECTOR, SUDA

Operator Name:

Reference Number: 20180700001631

Reference Date : 26/07/2018

Reference Generated

Status:

		_	_	7		
	NO.	O.	2			
22285		Scheme Id				
UPHCS		Description	Scheme			
NPA		Code	Treasury	Payee		
Barasat-l		Name	Treasury	Payee		
8		Couc	Code	Pavee Operator		
BARASAT	CHAIRMAN,		Name	Payee Operator		
	Payee Scheme Id 22094					
	UPHCS			Payee Scheme Description		
	608000			Amount		
	DRUG FOR UPHCS	PROCUREMENT OF		Tuposo		

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/07/2018 5:20 PM

Signature of Joint Signatory

State Urban Development Agency

Director

e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code: 19

Operator Designation:

DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-020-0-23-00

Memo No. :

SUDA-HEALTH/501(PT.II)

Local Advice Id: Local Advice Date: 30/07/2018

Memo Date :

30/07/2018

					For use	of the Operato	ď						ry/PAO
	Details	s of Payee Operator			Det	tails of Recipie	nt Operato	ır					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001647	22265	UPHCS	NPC	Ватескроге-	7	Chairman, Halis	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	368000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001648	22285	UPHCS	HGB	Hooghly-II	8	CHAIRMAN HLY-CNS	22058	UPHCS	00-8448-00-102-00-001- 0-07-00	520000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001649	22285	UPHCS	HWB	Howrah-II	27	HOWRAH MUNICIPAL	22331	UPHCS	0-8448-00-102-00-001- 0-07-00	1572000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001650	22285	UPHCS	NAC	Kalyani	13	CHAIRMAN, KALYANI	22074	UPHCS	0-8448-00-102-00-001- 0-07-00	76000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001651	22285	UPHCS	NPC	Barrackpore-	8	Chairman ,Kamarhati	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	304000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2840000 Rupees(in words) Twenty Eight Lakh Forty Thousand only as transfer.

Signature of PL/LF/PF/OD Operation Urban Development Agency nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code:

Operator Name: DIRECTOR, SUDA

Net Amount:

368000

Reference Number: 20180700001647

27/07/2018

Reference Date :

Reference Generated

Status:

DRUG FOR UPHCS	368000	UPHCS	22204	Chairman,Halisahar Municipality	7	Barrackpore -I	NPC	UPHCS	22285	_
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No.

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:17 PM

State Urban Development Agency

Signature of Joint Signatory

PAO-III Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name : DIRECTOR, SUDA

Reference Number : 20180700001648

Net Amount:

520000

Reference Date: 27/07/2018

Reference Generated

Status:

Z S Scheme Id 22285 Scheme Description UPHCS Treasury Code Payee HGB Hooghly-II Payee Treasury Name Payee Operator Code 00 CHAIRMAN HLY-CNS Payee Operator Name Payee Scheme Id 22058 Payee Scheme Description UPHCS Amount 520000 PROCUREMENT OF DRUG FOR UPHCS Purpose

18

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:18 PM

State Urban Development Agency

Director

Signature of Joint Signatory

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name : DIRECTOR, SUDA

Reference Number : 20180700001649

Net Amount:

Reference Date: 27/07/2018

Status: Reference Generated

No. Scheme Id 22285 Scheme Description **UPHCS** Payee Treasury Code HWB Howrah-II Payee Treasury Name Payee Operator Code 27 Payee Operator Name HOWRAH Payee Scheme Id 22331 Payee Scheme Description UPHCS 1572000 Amount PROCUREMENT OF DRUG FOR UPHCS Purpose

(2)

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:20 PM

State Urban Development Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Name: Operator Code :

DIRECTOR, SUDA

Reference Date: Reference Number : 20180700001650

Net Amount:

76000

27/07/2018

Reference Generated

Status:

No.

Scheme Id 22285 Scheme Description **UPHCS** Treasury Code Payee NAC Kalyani Payee Treasury Name Payee Operator Code 13 Payee Operator Name CHAIRMAN, KALYANI Payee Scheme Id 22074 Payee Scheme Description UPHCS Amount 76000 PROCUREMENT OF DRUG FOR UPHCS Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

State Urban Development Agency

Signature of Joint Signatory

Printed On: 27/07/2018 12:22 PM

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code:

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180700001651

Net Amount:

304000

Reference Date: 27/07/2018

Reference Generated

Status:

_	No.
22285	Scheme id
UPHCS	Scheme Description
NPC	Payee Treasury Code
Barrackpore	Payee Treasury Name
CO	Payee Operator Code
Chairman ,Kamarhati	Payee Operator Name
22204	Payee Scheme Id
UPHCS	Payee Scheme Description
304000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:23 PM

Signature of the Administrator State Urban Development Agency Director

Signature of Joint Signatory

e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation:

DIRECTOR, SUDA

Local Advice Id :

Local Advice Date: 30/07/2018

Memo No. :

SUDA-HEALTH/501(PT.II)

Memo Date : 30/07/2018

					For use	of the Operato	r					For u	
	Detail	s of Payee Operator			Del	tails of Recipie	nt Operato	r					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payes Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objector
20180700001652	22285	UPHCS	NPC	Barrackpore-	9	Chairman,Kan chrapant	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	228000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001653	22285	UPHCS	MIF	Kharagpur	11	CHAIRMAN KHARAGPUR	22379	UPHCS	00-8448-00-102-00-001- 0-07-00	584000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001654	22285	UPHCS	HGF	Greerampore	16	CHAIRMAN,K ONNAGAR	22235	UPHCS	0-8448-00-102-00-001- 0-07-00	292000	PROCUREMENT OF DRUG FOR UPHCS		
20160700001655	22285	UPHCS	NPA	Barasat-I	13	CHAIRMAN, MADHYAMGR	22094	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001656	22285	UPHCS	NPC	Barreckpore-	11	Chairman, Naihati	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2120000 Rupees(in words) Twenty One Lakh Twenty Thousand only as transfer.

Signature of PL/LF/PF/OD Operation Urban Development Agency nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Net Amount:

228000

Reference Number: 20180700001652

Reference Date: 27/07/2018

Status:

Reference Generated

	No.
22285	l. Scheme Id
UPHCS	Scheme Description
NPC	Payee Treasury Code
Barrackpore	Payee Treasury Name
9	Payee Operator Code
Chairman, Kanchrap ara	Payee Operator Name
22204	Payee Scheme Id
UPHCS	Payee Scheme Description
228000	Amount
DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:25 PM

State Urban Development Agency Signature of Joint Signatory

Director

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

584000

Reference Number: 20180700001653

Reference Date: 27/07/2018

Reference Generated

Status:

	_	No.
	22285	Scheme Id
	UPHCS	Scheme Description
	MIF	Payee Treasury Code
	Kharagpur	Payee Treasury Name
	11	Payee Operator Code
	CHAIRMAN	Payee Operator Name
	22379	Payee Scheme Id
	UPHCS	Payee Scheme Description
	584000	Amount
0.00	PROCUREMENT OF	Purpose

TO

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:26 PM

State Urban Development Agency Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code:

Operator Name: DIRECTOR, SUDA

20180700001654

Net Amount:

292000

Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Date:

Reference Number:

27/07/2018

Reference Generated

Status:

				9		e=		THE RESERVE OF THE PERSON OF T		
DRUG FOR UPHCS	292000	UPHCS	22235	CHAIRMAN,KONNA	16	Sreerampor	HGF	UPHCS	22285	
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator P	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No. Se

Signature of the Assistant/Accountant

Signature of the Administrator

State Urban Development Agency Director

Signature of Joint Signatory

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:27 PM

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code:

Operator Name: DIRECTOR, SUDA

Reference Number:

20180700001655

Net Amount:

508000

Reference Date: 27/07/2018

Status: Reference Generated

	No.
22285	Scheme Id
UPHCS	Scheme Description
NPA	Payee Treasury Code
Barasat-I	Payee Treasury Name
13	Payee Operator Code
CHAIRMAN, MADHYAMGRAM	Payee Operator Name
22094	Payee Scheme Id
UPHCS	Payee Scheme Description
508000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:29 PM

State Urban Development Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

DIRECTOR, SUDA

Operator Name:

Reference Number:

20180700001656

Net Amount:

508000

Reference Date: 27/07/2018

Status: Reference Generated

Payee Operator Code Code Chairman, Naihati Municipality Payee Scheme Description Scheme Id Payee Scheme Description Scheme Id Payee Scheme Description UPHCS	Payee Operator Payee Name Scheme Id Chairman, Naihati 22204
erator Payee Scheme Id Naihati 22204	erator Payee Scheme Description Scheme Id Naihati 22204 UPHCS
	Payee Scheme Description UPHCS
Payee Scheme Description UPHCS	
	Amount 508000

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency

Printed On: 27/07/2018 12:31 PM

Signature of Joint Signatory

Directo



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code:

19

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Designation:

DIRECTOR, SUDA

Local Advice Id :

Local Advice Date: 30/07/2018

Memo No. :

SUDA-HEALTH/501(PT.II)

Memo Date :

30/07/2018

					For use	of the Operato	r				9		ry/PAO
	Details	s of Payee Operator			Dei	tails of Recipie	nt Operato	r					
Reference No.	Scheme id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001657	22285	UPHCS	NPC	Barrackpore-	12	Chairman, New	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001658	22285	UPHCS	NPC	Barrackpore-	13	Chairman, North	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	724000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001659	22285	UPHCS	NPC	Barrackpore-	14	Chairman,Pani	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	596000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001660	22285	UPHCS	SPB	Alipore-II	6	CHAIRMAN	22324	UPHCS	0-8448-00-102-00-001- 0-07-00	76000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001661	22285	UPHCS	UDB	Raigunj-I	13	Chairman, Raiganj	22210	UPHCS	0-8448-00-102-00-001-	432000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2336000 Rupees(in words) Twenty Three Lakh Thirty Six Thousand only as transfer.

Signature of PL/LF/PF/OD Operator Tate Urban Development Agencylature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

DIRECTOR, SUDA

Operator Name: 20180700001657

Net Amount:

508000

Reference Number:

27/07/2018

Reference Date:

Reference Generated

Status:

DRUG FOR UPHCS	508000	UPHCS	22204	Chairman, New Barrackpore	12	Barrackpore	NPC	UPHCS	22285	<u> </u>
PROCLIREMENT OF										
Purpose	Amount	Payee Scheme Description	Payee Scheme Id	Payee Operator Name	Payee Operator Code	Payee Treasury Name	Payee Treasury Code	Scheme Description	Scheme Id	No.

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:33 PM

Signature of the Administrator State Urban Development Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code:

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001658

Net Amount:

724000

Reference Date: 27/07/2018

Status:

Reference Generated

200	
_	No.
22285	Scheme Id
UPHCS	Scheme Description
NPC	Payee Treasury Code
Barrackpore -I	Payee Treasury Name
13	Payee Operator Code
Chairman, North Barrackpore	Payee Operator Name
22204	Payee Scheme Id
UPHCS	Payee Scheme Description
724000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:34 PM

State Urban Davelopment Agency Director

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number:

20180700001659

Net Amount:

Reference Date: 27/07/2018

Reference Generated

Status:

7			7	
		-	_	SI
	22285			Scheme Id
	UPHCS		Description	Scheme
	NPC		Code	Treasury
_	Barrackpore		Name	
	14		Code	Pavee Operator
Municipality	Chairman, Panihati	A SANDA SAND	Name	
*******	NUCCC	000000000000000000000000000000000000000	Payee Scheme Id	
UPHCS			Payee Scheme Description	
596000		, and only	Amount	
DRUG FOR UPHCS		rurpose		

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

State Urban Development Agency Director

Signature of Joint Signatory

Printed On: 27/07/2018 12:36 PM

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180700001660

Net Amount:

76000

Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Date: 27/07/2018

Reference Generated

Status:

	-	No.
	22285	Scheme Id
	UPHCS	Scheme Description
	SPB	Payee Treasury Code
	Alipore-II	Payee Treasury Name
	6	Payee Operator Code
	CHAIRMAN PUJALI MUNICIPALITY	Payee Operator Name
	22324	Payee Scheme Id
	UPHCS	Payee Scheme Description
	76000	Amount
DAGG FOR OFFICE	PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:39 PM

Signature of the Administrator State Urban Development Agency

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

432000

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001661

Reference Date: 27/07/2018

Status: Reference Generated

_	No.
22285	Scheme Id
UPHCS	Scheme Description
UDB	Payee Treasury Code
Raigunj-I	Payee Treasury Name
13	Payee Operator Code
Chairman, Raiganj Municipality -LF A/C	Payee Operator Name
22210	Payee Scheme Id
UPHCS	Payee Scheme Description
432000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency Printed On: 27/07/2018 12:41 PM

Signature of Joint Signatory



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Operator Designation :

DIRECTOR, SUDA

Local Advice id :

Head of Account: 00-8448-00-120-00-020-0-23-00

Local Advice Date : 30/07/2018

Memo No. :

SUDA-HEALTH/501(PT.II)

Memo Date :

					For use	of the Operato	r					For u	ise of ry/PAO
	Details	s of Payee Operator			De	tails of Recipie	nt Operato	or					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payes Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objects
20180700001662	22285	UPHCS	SPD	Baruipur	9	CHAIRMAN.R AJPUR	22349	UPHCS	00-8448-00-102-00-001- 0-07-00	800000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001663	22285	UPHCS	HGF	Sreerampore.	14	CHAIRMAN, RISHRA	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	292000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001665	22285	UPHCS	HGF	Breerampore II	10	CHAIRMAN, SERAMPORE	22235	UPHCS	0-07-00	520000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001888	22285	UPHCS	DAD	Siliguri-I	14	(LF) CEO SILIGURI	22257	UPHCS	00-8448-00-102-00-001- 0-07-00	888000	PROCUREMENT OF DRUG FOR UPHCS	1	
20180700001888	22285	UPHC8	NPC	Berrsckpore-	15	Chairman, Sout	22204	UPHCS	0-8448-00-102-00-001-	736000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 3236000 Rupees(in words) Thirty Two Lakh Thirty Six Thousand only as transfer.

Signature of PL/LF/PF/OD Operation Urban Development Agency nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number:

20180700001662

Net Amount:

800000

Reference Date: 27/07/2018

Reference Generated

Status:

_	No.
22285	Scheme Id
UPHCS	Scheme Description
SPD	Payee Treasury Code
Baruipur	Payee Treasury Name
9	Payee Operator Code
CHAIRMAN.RAJPU R	Payee Operator Name
22349	Payee Scheme Id
UPHCS	Payee Scheme Description
800000	Amount
PROCUREMENT OF	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:43 PM

State Urban Development Agency Director

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Name: Operator Code: DIRECTOR, SUDA 19 Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number: 20180700001663 Net Amount:

292000

Reference Date: 27/07/2018

Status: Reference Generated

-	No.
22285	Scheme Id
UPHCS	Scheme Description
HGF	Payee Treasury Code
Sreerampor e II	Payee Treasury Name
14	Payee Operator Code
CHAIRMAN, RISHRA	Payee Operator Name
22235	Payee Scheme Id
UPHCS	Payee Scheme Description
292000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

D

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:45 PM

Signature of the Administrator State Urban Development Agency

Director

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Net Amount:

520000

Reference Number: 20180700001665

Reference Date: 27/07/2018

Status: Reference Generated

1	SI.
22285	Scheme Id
UPHCS	Scheme Description
HGF	Payee Treasury Code
Sreerampor e II	Payee Treasury Name
10	Payee Operator Code
CHAIRMAN, SERAMPORE	Payee Operator Name
22235	Payee Scheme Id
UPHCS	Payee Scheme Description
520000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:47 PM

State Urban Development Agency

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

Reference Number: 20180700001666

Net Amount:

888000

Reference Date: 27/07/2018

Status: Reference Generated

	7.0
_	No.
22285	Scheme Id
UPHCS	Scheme Description
DAD	Payee Treasury Code
Siliguri-l	Payee Treasury Name
14	Payee Operator Po
(LF) CEO SILIGURI MUNICIPAL	Payee Operator Name
22257	Payee Scheme Id
UPHCS	Payee Scheme Description
888000	Amount
PROCUREMENT OF DRUG FOR UPHCS	Purpose

B

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:49 PM

State Urban Development Agency

Director

Signature of Joint Signatory

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

DIRECTOR, SUDA

Operator Name: 20180700001668

Net Amount:

736000

Reference Number:

27/07/2018

Status: Reference Generated Reference Date:

No. Scheme Id Scheme Description **UPHCS** Treasury Code Payee NPC Barrackpore -I Payee Treasury Name Payee Operator Code 15 Chairman,South Dum Dum Payee Operator Name Payee Scheme Id 22204 Payee Scheme Description UPHCS 736000 Amount PROCUREMENT OF DRUG FOR UPHCS Purpose

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 12:52 PM

State Urban Development Agency

Director

Signature of Joint Signatory



e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code: 19

Operator Designation : DIRECTOR, SUDA

Local Advice Id:

Head of Account: 00-8448-00-120-00-020-0-23-00

Memo No. :

SUDA-HEALTH/501(PT.II)

Local Advice Date : 30/07/2018

Memo Date :

30/07/2018

					For use	of the Operato	r					For u Treasu	ise of ry/PAO
	Details	s of Payee Operator			Det	tails of Recipie	nt Operato	r					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objecte
20180700001569	22285	UPHCS	NPC	Barrackpore-	16	Chairman, Titagarh	22204	UPHCS	00-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001570	22285	UPHCS	HWC	Uluberia	10	CHAIRMAN, ULUBERIA	22173	UPHCS	00-8448-00-102-00-001- 0-07-00	584000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001671	22285	UPHCS	HGF	Sreerampore	18	CHAIRMAN,U TTARPARA-	22235	UPHCS	00-8448-00-102-00-001- 0-07-00	584000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001673	22285	UPHCS	NPG	Bidhannagar	50	COMMISSION ER.	22432	UPHCS	00-8448-00-102-00-001- 0-07-00	672000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2348000 Rupees(in words) Twenty Three Lakh Forty Eight Thousand only as transfer.

Assistant/Accountant

Signature of PL/LF/PF/OD Operation Urban Development Agens, nature of Joint Signatory

Printed By: SUTANU PRASAD KAR

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

20180700001669

Net Amount:

508000

Reference Date: 27/07/2018 Reference Number:

Reference Generated

Status:

	_	_		
<u>.</u>	No.	<u>S</u>		
22285	0	Scheme Id		
UPHCS	Description	Scheme		
NPC	Code	Treasury	Payee	
Barrackpore		Treasury		
16		Code	Pavee Operator	
Chairman, Litagarh MuNicipality		Name	Payee Operator	
22204		Scheme Id	Payee	
UPHCS			Payee Scheme Description	
	508000		Amount	
DRUG FOR OFFICE	PROCUREMENT OF		Pulpose	

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:53 PM

Signature of the Administrator State Urban Development Agency Director

Signature of Joint Signatory

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name : DIRECTOR, SUDA

Reference Number: 20180700001670

Net Amount:

584000

Reference Date: 27/07/2018

Reference Generated

Status:

No. Scheme Id 22285 Scheme Description UPHCS Treasury Code Payee HWC Payee Treasury Name Uluberia Payee Operator Code 10 Payee Operator Name CHAIRMAN, ULUBERIA Payee Scheme Id 22173 Payee Scheme Description UPHCS Amount 584000 PROCUREMENT OF DRUG FOR UPHCS Purpose

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency

Director

Printed On: 27/07/2018 12:55 PM

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Operator Code: 19 Head of Account: 00-8448-00-120-00-020-0-23-00

Reference Number: 20180700001671 Net Amount:

584000

Reference Date: 27/07/2018 Operator Name:

DIRECTOR, SUDA

Status: Reference Generated

_	NO.				
	-	-	Scheme Id		
22285	22285				
UPHCS	UPHCS				
HGF		Code	Ireasury	Payee	
e II		Name	Treasury		
18			Code	Payee Operator	
PARA-	CHAIRMAN,UTTAR		Name	Payee Operator	
66233	33335		Scheme Id	Payee	
	HPHCS			Payee Scheme Description	
	584000			Amount	
	DBI IG FOR LIPHCS	DECLIBEMENT OF		Purpose	

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Printed On: 27/07/2018 12:56 PM

Signature of the Administrator State Urban Development Agency Director

Signature of Joint Signatory

PAO-III Reference Details

For

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name:

DIRECTOR, SUDA

OR, SUDA

Net Amount:

672000

Reference Number: 20180700001673

Reference Date: 27/07/2018

Reference Generated

Status:

No. Scheme Id 22285 Scheme Description **UPHCS** Treasury Code Payee NPG Bidhannaga Payee Treasury Name Payee Operator Code 50 COMMISSIONER, BIDHANNAGAR Payee Operator Name Payee Scheme Id 22432 Payee Scheme Description UPHCS 672000 Amount PROCUREMENT OF DRUG FOR UPHCS Purpose

(B)

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 1:14 PM

Director
State Urban Development Agency

Signature of Joint Signatory





e-Advice For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

(For Transfer from one Operator to another Operator)

Operator Code :

Operator Designation : DIRECTOR, SUDA

Local Advice Id :

Head of Account: 00-8448-00-120-00-020-0-23-00

Local Advice Date: 30/07/2018

Memo No. :

SUDA-HEALTH/501(PT.II)

Memo Date :

30/07/2018

					For use	of the Operator	r					For u	
-	Details	s of Payee Operator			De	tails of Recipie	nt Operato	ıt					
Reference No.	Scheme Id of Operator	Scheme Description of Operator	Payee Treasury code	Payee Treasury Name	Operator Code of Payee	Designation of Payee Operator	Scheme Id of Payee Operator	Scheme Description of Payee Operator	Head of Account of the Payee Operator	Amount(Rs.)	Purpose	Approved	Objected
20180700001632	22285	UPHCS	NPC	Barrackpore-	2	Chairman,Barr ackpore	22204	UPHCS	0-8448-00-102-00-001- 0-07-00	508000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001633	22285	UPHCS	SPD	Baruipur	11	CHAIRMAN.B ARUIPUR	22349	UPHCS	0-8448-00-162-00-001- 0-07-00	76000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001635	22285	UPHCS	HGD	Chandernag	5	Chairman,Bha dreswar	22295	UPHCS	0-8448-00-102-00-001-	724000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001636	22285	UPHCS	NPC	Barrackpore-	4	Chairman, Bhat	22204	UPHCS	00-8448-00-102-00-001-	736000	PROCUREMENT OF DRUG FOR UPHCS		
20180700001639	22285	UPHCS	HGD	Chandernag	8	Chairman,Cha mpdani	22295	UPHCS	00-8448-00-102-00-001- 0-07-00	368000	PROCUREMENT OF DRUG FOR UPHCS		

Pay Rs. 2412000 Rupees(in words) Twenty Four Lakh Twelve Thousand only as transfer.

Assistant/Accountant

Signature of PL/LF/PF/OD Operator

Printed By: SUTANU PRASAD KAR

Reference Details

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Operator Code: 19

Operator Name: DIRECTOR, SUDA

20180700001632

Net Amount:

508000

Reference Number:

26/07/2018

Reference Date:

Reference Generated

Status:

1 22285	SI. Scheme Id
UPHCS	Scheme Description
NPC	Payee Treasury Code
Barrackpore	Payee Treasury Name
2	Payee Operator Code
Chairman,Barrackpo re	Payee Operator Name
22204	Payee Scheme Id
UPHCS	Payee Scheme Description
508000	Amount
DRUG FOR UPHCS	Purpose

D

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/07/2018 5:21 PM

State Urban Development Agency Director

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001633

Reference Date: 26/07/2018

Status: Reference Generated

1		No.	<u>S</u>				
22285			Scheme Id				
UPHCS	UPHCS						
SPD	SPD			Payee			
Baruipur		Name	Treasury	Payee			
1	11			Pavee Operator			
PUR	CHAIRMAN.BARUI			Payee Operator			
	22349		Scheme Id	Payee			
	UPHCS			Pavee Scheme Description			
	76000		Amount				
	DRUG FOR UPHCS	PROCUREMENT OF		Purpose			

R

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 26/07/2018 5:22 PM

Signature of Joint Signatory

State Urban Development Agency

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

724000

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001635

Reference Date : 27/07/2018

Reference Generated

Status:

No. Scheme id 22285 Scheme Description **UPHCS** Treasury Code Payee HGD Chanderna Payee Treasury Name gore Payee Operator Code O Chairman, Bhadresw Payee Operator Name Payee Scheme Id 22295 Payee Scheme Description UPHCS 724000 Amount PROCUREMENT OF DRUG FOR UPHCS Purpose

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator State Urban Development Agency

Printed On: 27/07/2018 10:30 AM

Signature of Joint Signatory

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

736000

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number : 20180700001636

Reference Date:

27/07/2018

Status: Reference Generated

No. Scheme id 22285 Scheme Description UPHCS Treasury Code Payee NPC Barrackpore Payee Treasury Name Payee Operator Code 4 Chairman,Bhatpara Municipality Payee Operator Name Payee Scheme Id 22204 Payee Scheme Description UPHCS Amount 736000 PROCUREMENT OF DRUG FOR UPHCS Purpose

P

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 10:32 AM

Signature of Joint Signatory

State Urban Development Agency

Xfer -To Operator List For Personal Ledger Account/Local Fund Account/Provident Fund Account/Other Deposit Account

Head of Account: 00-8448-00-120-00-020-0-23-00

Net Amount:

Operator Code: 19

Operator Name: DIRECTOR, SUDA

Reference Number: 20180700001639

27/07/2018

Reference Date:

Reference Generated

Status:

		No.	S		
22285		Ochonic	Sohomo Id		
UPHCS		Description	Scheme		
HGD		Code	Treasury	Payee	
Cildilucilla	Chandorna	Name	Treasury		
o			Code	Pavee Operator	
ni.	Chairman, Champda			Payee Operator	
i i	22295		Scheme Id	Payee	
	UPHCS			Payee Scheme Description	
	368000			Amount	
	DRUG FOR UPHCS	PROCLIREMENT OF		Pulpose	

Signature of the Assistant/Accountant

Printed By: DIPANKAR CHOWDHURY

Signature of the Administrator

Printed On: 27/07/2018 11:35 AM

State Urban Development Agency

Signature of Joint Signatory

[See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197] T. R. FORM NO. 31

Grant-in-aid Bill/Consolidated Grant-in-aid Bill



Name of the Office:

D.D.O.Code CAFUDA002

Date:

Bill No. SUDA-39/18-19

Date: 28/06/2018

Ref No:

20180605390161

Head Of Account Code 72-2217-05-192-00-051-V-35-00

Token No

Gross Amount: Rs. 7630000

Net Amount: Rs

0

By-Transfer: Rs.

Z

PL Transfer: Rs.

7630000

T.V. No.

Date:

Sanctioned Amount (Rs): Sanctioned by: SPL. SECRETARY, UD & MA | Sanction No. & Date: 7630000 period From: 01/04/2018 period To: 31/03/2019 117(SANC.)/MA/P/C-10/3S-33/2011 - 25-Jun-2018 (Copy enclosed) Purpose : IMPLEMENTATION OF ON GOING HEALTH

Amount (Rs.)

Total Amount Rupees

Name of the Grantee Institution

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

AND / OR

	NIL	NIL	NIL	
		Description	Tead of Account	ONO

AND / OR

PL Transfer Rs. 7630000 Rupees (in words) Seventy Six Lakh Thirty Thousand only as per benificiaries list enclosed

7630000.00	UPHCS	22285	DIRECTOR, SUDA	19	PAO-III	CAF
Amount (Rs.)	Scheme Description	Scheme ID	Operator Name	Operator Code Operator Name	Treasury Name	Code

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.

(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority.

(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.

(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.

(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master.

Signature of the D.D.O.

Station :

Director

State Urban Development Agency

Ref No: 20180605390161 For use in the Office of the Accountant General (Audit), West Bengal UPHCS BT Type Z Scheme Description PL Transfer Rs. 7630000 Rupees (in words) Seventy Six Lakh Thirty Thousand only as per benificiaries list enclosed Audit Officer For use in the Treasury Scheme ID 22285 AND / OR AND / OR DIRECTOR, SUDA T.O./A.T.O./P.A.C./A.P.A.O. Operator Code Operator Name Description Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed as below-Z S.O./A.O. By-Transfer Credit Rs. Nil. Rupees (in words) NIL 19 Head of Account Ħ Treasury Name PAO-III Examined and Entered. Reason of Objection_ Accountant /J.A.O. Objected to Rs. Admitted for Rs. Treasury SI No. CAF Auditor

Amount (Rs.)

Amount (Rs.)

7630000.00

T. R. FORM NO. 7A [See G. O No. 6229-F(Y) Dt. 18/08/2015] By-Transfer Challan Form



Name of the Treasury Office: - PAO-III



Ref No: 20180605390161

D.D.O. Designation :-					
	DIRECTOR,	SUDA			
D.D.O. Code :-	CAFUDA002				
Reference No. :-	20180605390	0161			
Bill No. & Date:	SUDA-39/18-19	28/06/2018	Gross Amount (Rs.):	7630000 Ne	Amount (Rs.): 0
Total PF/ LF/ PL /	Amount in this Bill: Rs.	7630000	By-Transf	er Credit Amount in the	s Bill: Rs.
Head of Account Debited	d: - 72-2217-05-1	192-00-051-35-00-V			
By-Transfer Credit Rs	Rupees (in word	is)	only as below	v:-	
Head of	Account Credited		Description		Amount (Da)
					Amount (Rs.)
PF/LF/PL-Transfer Cred	it Rs. 7630000 Rupees	(in words) Seventy Six	AND/OR Lakh Thirty Thousand only as be	elow:-	
	Account Credited		Description		Amount (Rs.)
	120-00-013-07-00-0	DIRECTOR, SU	DA		7630000
Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS
Bill Clerk Station: Date: 28/06/2018		Accountant	58 all 8		Drawing & Disbursion Director State Urban Development Ag
Station:					()00
tation : ate : 28/06/2018			Sor use at the Treasury		Director
station: ate: 28/06/2018 ccepted and amount tra	nsferred vide:				Director
Station : late : 28/06/2018 ccepted and amount tra-	nsferred vide:		For use at the Treasury		Director
station : late : 28/06/2018 ccepted and amount tra- liken No.	nsferred vide:		For use at the Treasury Date: Date:		Director
Station : Date : 28/06/2018 Accepted and amount tracken No.	nsferred vide:		For use at the Treasury		Director
Station : Date : 28/06/2018 Accepted and amount tracken No. V. No.: hallan No.			For use at the Treasury Date: Date:		Director
Station :	.O.		Date: Date: Date:		Director State Urban Development Ag
station : ate : 28/06/2018 ccepted and amount tra- ken No. V. No.: nalian No.	.O.		For use at the Treasury Date: Date:	(Audit), West Be	Director State Urban Development Ag
ccepted and amount tra- ken No. V. No.: hallan No. Accountant /J.A.	.o. For us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag
Station : Date : 28/06/2018 Coccepted and amount transleten No. V. No.: hallan No. Accountant /J.A	.o. For us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag
Station : Date : 28/06/2018 Accepted and amount tracken No. V. No.: hallan No. Accountant /J.A	.o. <u>For</u> us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag
Station : Date : 28/06/2018 Accepted and amount tracken No. V. No.: hallan No. Accountant /J.A	.o. <u>For</u> us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag
Station : late : 28/06/2018 Accepted and amount tracken No. V. No.: Accountant /J.A Imitted Rs. Sjected Rs.	.o. <u>For</u> us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag
Station : Date : 28/06/2018 Accepted and amount tracken No. V. No.: hallan No.	.o. <u>For</u> us	se in the Office of	Date: Date: Date:	(Audit), West Be	Director State Urban Development Ag

GOVERNMENT OF WEST BENGAL

Tel:

Fax:

Memo No: 117(Sanction)/MA/P /C-10/3S-33/2011

Date: 25/06/2018

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2018 - 2019

1. Sanctioning Authority: Urban Development and Municipal Affairs

2. Name of the Grantee Institution: State Urban Development Authority

3. Address of the Grantee Institution: ILGUS Bhavan, HC Block , Sector âÂÂIII, Salt Lake City, Kolkata 700 064

4. Category of Grantee Institution: Others

5. Amount Sanctioned: 7630000 (in words Rs. Seventy Six Lakh Thirty Thousand Only.)

6. Name of the DDO: DIRECTOR, SUDA

7. Department Code: UM-Urban Development and Municipal Affairs

8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III

9. Nature of Grant

(a) Recurring or Non-recurring: Non-Recurring

(b) Capital or Revenue: Revenue

10. Condition of Grant

Utilisation Certificate required: Yes

11. Category of Grant: Others

12. Purpose of Grant: Procurement of 14 nos. Of ELISA Machines for 14 ULBs.

- 13. An amount of Rs 7630000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head of account 2217-05-192-00-051-35-00-V from the budget provision of the financial year,2018 - 2019 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code :2217-05-192-00-051-35-00-V
- 15. Name of the Scheme :Grants to Municipalities for ongoing schemes of earstwhile BMS programmes
- 16. The amount will be drawn in T.R. from No.31/32/43 (As applicable as per WBTR)
- 17. The sanctioned amount will be payable to State Urban Development Authority by Transfer Credit to the Head of Account of the LF/PL/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.

18. Remarks: Fund is sanctioned as per proposal of SUDA vide File no. SUDA-Health/356/18, subject to strict observation of all rules & regulations of Govt. of W.B including e-tender rules & submission of UC in due course, timely completion of work to avoid escalation of cost, non-deviation of allotted fund from the approved scheme. This order issues with the concurrence of FA, UD & MA Deptt vide UO No. 72/UD&MA dt. 25.06.2018.

19. Total released amount is within the Budget Provision of the above mentioned head of account during 2018 - 2019

20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1872-F.B dated-26.03.2018with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

SPECIAL SECRETARY

Copy forwarded for information and necessary action to:-

- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works & Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Department Group (N/R)
- 7. P.O (Health), SUDA, ILGUS Bhavan, HC Block, Sector ¢ÂÂIII, Salt Lake City, Kolkata 700 064
- 8. Finance Officer, SUDA, ILGUS Bhavan, HC Block, Sector âÂÂIII, Salt Lake City, Kolkata 700 064
- 9. P.S to M.I.C, UD&MA Department
- 10. Sr. P.A to Principal Secretary, UD&MA Department

SPECIAL SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

St No. Sub-Alloting Code / DDO Code Designation Amount
1. CAFUDA002-DIRECTOR, SUDA 7,630,000.00

7,630,000.00

SPECIAL SECRETARY

Annexure of Memo No- 117(Sanction)/MA/P /C-10/3S-33/2011 Date- 25/06/2018

Allotment From Department - UM-Urban Development and Municipal Affairs to - CAFUDA002-DIRECTOR, SUDA

Treasury Name: PAO-III Pay & Accounts Office-III,

ID	Head of Account	Scheme Description	Object of Expenditure	Alloted Amount
269987	72-2217-05-192-051-35-00-V	Grants to Municipalities for ongoing schemes of earstwhile BMS programme	Grants for creation of Capital Assets s	7630000

7,630,000.00

SPECIAL SECRETARY

32

GOVERNMENT OF WEST BENGAL

Tel:

Fax:

Memo No: 117(Sanction)/MA/P /C-10/3S-33/2011

Date: 25/06/2018

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2018 - 2019

1. Sanctioning Authority: Urban Development and Municipal Affairs

2. Name of the Grantee Institution: State Urban Development Authority

3. Address of the Grantee Institution: ILGUS Bhavan, HC Block , Sector âÂÂIII, Salt Lake City, Kolkata 700 064

4. Category of Grantee Institution: Others

5. Amount Sanctioned: 7630000 (in words Rs. Seventy Six Lakh Thirty Thousand Only.)

6. Name of the DDO: DIRECTOR, SUDA

7. Department Code: UM-Urban Development and Municipal Affairs

8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III

9. Nature of Grant

(a) Recurring or Non-recurring: Non-Recurring

(b) Capital or Revenue: Revenue

10. Condition of Grant

Utilisation Certificate required: Yes

11. Category of Grant: Others

12. Purpose of Grant: Procurement of 14 nos. Of ELISA Machines for 14 ULBs.

- 13. An amount of Rs 7630000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head of account 2217-05-192-00-051-35-00-V from the budget provision of the financial year,2018 - 2019 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code :2217-05-192-00-051-35-00-V
- 15. Name of the Scheme :Grants to Municipalities for ongoing schemes of earstwhile BMS programmes
- 16. The amount will be drawn in T.R. from No.31/32/43 (As applicable as per WBTR)
- 17. The sanctioned amount will be payable to State Urban Development Authority by Transfer Credit to the Head of Account of the LF/PL/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.

18. Remarks: Fund is sanctioned as per proposal of SUDA vide File no. SUDA-Health/356/18, subject to strict observation of all rules & regulations of Govt. of W.B including e-tender rules & submission of UC in due course, timely completion of work to avoid escalation of cost, non-deviation of allotted fund from the approved scheme. This order issues with the concurrence of FA, UD & MA Deptt vide UO No. 72/UD&MA dt. 25.06.2018.

19. Total released amount is within the Budget Provision of the above mentioned head of account during 2018 - 2019

20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1872-F.B dated-26.03.2018with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

SPECIALNECRETARY

Copy forwarded for information and necessary action to:-

- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works &Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Department Group (N/R)
- 7. P.O (Health), SUDA, ILGUS Bhavan, HC Block, Sector âÂÂIII, Salt Lake City, Kolkata 700 064
- 8. Finance Officer, SUDA, ILGUS Bhavan, HC Block, Sector âÂÂIII, Salt Lake City, Kolkata 700 064
- 9. P.S to M.I.C, UD&MA Department
- 10. Sr. P.A to Principal Secretary, UD&MA Department

SPECIAL SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

SI No.	Sub-Alloting Code / DDO Code Designation	Amount
1.	CAFUDA002-DIRECTOR, SUDA	7,630,000.00
		7,630,000.00

SPECIAL SECRETARY

Annexure of Memo No- 117(Sanction)/MA/P /C-10/3S-33/2011 Date- 25/06/2018

Allotment From Department - UM-Urban Development and Municipal Affairs to - CAFUDA002-DIRECTOR, SUDA

Treasury Name: PAO-III Pay & Accounts Office-III,

ID	Head of Account	Scheme Description	Object of Expenditure	Alloted Amount
269987	72-2217-05-192-051-35-00-V	Grants to Municipalities for ongoing schemes of earstwhile BMS programme	Grants for creation of Capital Assets	7630000

7,630,000.00

SPECIAL SECRETARY

GOVERNMENT OF WEST BENGAL
URBAN DEVELOPMENT AND MUNICIPAL AFFAIRS DEPARTMENT
MUNICIPAL AFFAIRS BRANCH
NAGARAYAN BHAWAN
BLOCK – DF, SECTOR – I, SALT LAKE
KOLKATA – 700064



No. 786/MA/P/C-10/3S-33/2011

Dated, Kolkata, the 26th day of June, 2018.

From: Special Secretary to the

Government of West Bengal

To: The Director,

State Urban Development Agency

Sir,

Sending herewith copy of GO No. 117(Sanction)/MA/P/C-10/3S-33/2011 dated 25.06.2018 for procurement of 14 No. ELISA Machine for 14 ULBs (list enclosed) after observing all financial norms.

Special Secretary

List of ULBs for procurement of ELISA Machine

Ref: GO No. 117(Sanction)/MA/P/C-10/3S-33/2011 dated 25.06.2018

SI. No	Name of ULBs	Number of ELISA Machine	
1	Siliguri MC	1	
2	Nabadwip	1	
3	Santipur	1	
4	Dhuliyan	1	
5	Domkal	1	
6	Bhadreswar	1	
7	Baidyabati	1	
8	Dankuni	1	
9	Bansberia	1	
10	Naihati	1	
11	Bhatpara	1	
12	Kanchrapara	1	
13	Khardah	1	
14	North Dum Dum	1	



GOVERNMENT OF WEST BENGAL

Tel:

Fax:

Memo No: 117(Sanction)/MA/P /C-10/3S-33/2011

Date: 25/06/2018

Sanction Order for Grant-in-Aid

Demand No.: 72

Department Code: UM

Financial Year:

2018 - 2019

1. Sanctioning Authority: Urban Development and Municipal Affairs

- 2. Name of the Grantee Institution: State Urban Development Authority
- 3. Address of the Grantee Institution: ILGUS Bhavan, HC Block , Sector âÂÂIII, Salt Lake City, Kolkata 700 064
- 4. Category of Grantee Institution: Others
- 5. Amount Sanctioned: 7630000 (in words Rs. Seventy Six Lakh Thirty Thousand Only.)
- 6. Name of the DDO: DIRECTOR, SUDA
- 7. Department Code: UM-Urban Development and Municipal Affairs
- 8. Name of the Treasury/PAO:Pay & Accounts Officer-III, PAO-III
- 9. Nature of Grant

(a) Recurring or Non-recurring: Non-Recurring

(b) Capital or Revenue: Revenue

10. Condition of Grant

Utilisation Certificate required: Yes

- 11. Category of Grant : Others
- 12. Purpose of Grant: Procurement of 14 nos. Of ELISA Machines for 14 ULBs.
- 13. An amount of Rs 7630000 is hereby allotted for this period in favour of the DIRECTOR, SUDA From the head of account 2217-05-192-00-051-35-00-V from the budget provision of the financial year,2018 - 2019 under Demand No.72 Department Code UM and payable to Grantee Institution or by A/c payee cheque/By-Transfer Credit / ECS.
- 14. Head of Account Code :2217-05-192-00-051-35-00-V
- 15. Name of the Scheme :Grants to Municipalities for ongoing schemes of earstwhile BMS programmes
- 16. The amount will be drawn in T.R. from No.31/32/43 (As applicable as per WBTR)
- 17. The sanctioned amount will be payable to State Urban Development Authority by Transfer Credit to the Head of Account of the LF/Pt/Deposit Account of the Grantee Institution or by A/C payee Cheque / ECS as applicable.

18. Remarks: Fund is sanctioned as per proposal of SUDA vide File no. SUDA-Health/356/18, subject to strict observation of all rules & regulations of Govt. of W.B including e-tender rules & submission of UC in due course, timely completion of work to avoid escalation of cost, non-deviation of allotted fund from the approved scheme. This order issues with the concurrence of FA, UD & MA Deptt vide UO No. 72/UD&MA dt. 25.06.2018.

- 19. Total released amount is within the Budget Provision of the above mentioned head of account during 2018 2019
- 20. This order issues in exercise of the power delegated under Finance Department Memo. No. 1872-F.B dated-26.03.2018with the concurrence of Finance Deptt. vide Gr. U.O. No. Date null

Copy forwarded for information and necessary action to:-

- 1. The Principal Accountant General (A&E), Treasury Buildings, Kolkata-700001
- 2. The Principal Accountant General (Audit), Treasury Buildings, Kolkata-700001
- 3. The Principal Accountant General (Receipt, Works & Local Bodies Audit), CGO Complex at Salt Lake, Kolkata-700091
- 4. DIRECTOR, SUDA
- 5. Pay & Accounts Officer-III, PAO-III
- 6. Finance Department Group (N/R)
- 7. P.O (Health), SUDA, ILGUS Bhavan, HC Block, Sector A¢ÂÂIII, Salt Lake City, Kolkata 700 064
- 8. Finance Officer, SUDA, ILGUS Bhavan, HC Block, Sector A¢ÂÂIII, Salt Lake City, Kolkata 700 064
- 9. P.S to M.I.C, UD&MA Department
- 10. Sr. P.A to Principal Secretary, UD&MA Department

SPECIAL SECRETARY

Sub-Alloting Officer / DDO wise Alloted Amount Summary

SI No.	Sub-Alloting Code / DDO Code Designation	Amount
1.	CAFUDA002-DIRECTOR, SUDA	7,630,000.00
		7,630,000,00

SPECIAL SECRETARY

Annexure of Memo No- 117(Sanction)/MA/P /C-10/3S-33/2011 Date- 25/06/2018

Allotment From Department - UM-Urban Development and Municipal Affairs to - CAFUDA002-DIRECTOR, SUDA

Treasury Name: PAO-III Pay & Accounts Office-III,

1D	Head of Account	Scheme Description	Object of Expenditure	Alloted Amount
269987	72-2217-05-192-051-35-00-V	Grants to Municipalities for ongoing schemes of earstwhile BMS programme	Capital Assets	7630000
	The state of the s			7 630 000 00

7,630,000.00

T. R. FORM NO. 31 [See sub-rule (1) of T. R. 4.195 & sub-rule (1) 4.197]

Grant-in-aid Bill/Consolidated Grant-in-aid Bill

SUDA-23/18-19



Ref No: 20180505258482

Name	of	the	Office

D.D.O.Code CAFUDA002

Date:

Token No.

Date:

T.V. No.

Date

Head Of Account Code 72-2217-05-191-00-023-V-31-02

Gross Amount: Rs.

3644000

Net Amount: Rs.

By-Transfer: Rs.

NIL

28/05/2018

PL Transfer: Rs. 3644000 SPL. SECRETARY, UD & MA Sanction No. & Date: Sanctioned by: 74(SANC.)/MA/N/C-10 - 25-May-2018 (Copy enclosed) DEPT. Purpose : IMPLEMENTATION OF URBAN PRIMARY HEALTH CARE SERVICES IN URBAN WEST BENGAL Sanctioned Amount (Rs): 3644000 period From: 01/04/2018 period To: 31/03/2019 Name of the Grantee Institution Amount (Rs.) Total Amount Rupees:

Pay Rs. 0 Rupees (in words) NIL as per beneficiary list enclosed

AND / OR

By-Transfer Credit Rs. NIL Rupees (in words) NIL as below-

CI M	11. 1. 1. 1.			
SI No	Head of Account	Description	BT Type	Amount (Rs.)
1	NIL	NIL	NIL	NIL

PL Transfer Rs. 3644000 Rupees (in words) Thirty Six Lakh Forty Four Thousand only as per benificiaries list enclosed

Treasury Code	Treasury Name	Operator Code	Operator Name	Scheme ID	Scheme Description	Amount (Rs.)
CAF	PAO-III	19	DIRECTOR, SUDA	22285	UPHCS	3644000.00

Certified that:

(a) The amount of this bill was not drawn before and it agrees with that in the office copy of this bill.
(b) The utilisation report in respect of the previous grant has been furnished and accepted by the sanctioning authority,
(c) The utilisation report in respect of the present amount will be furnished to the sanctioning authority by Grantee Organisation in due course.
(d) The amount claimed in this bill was not drawn before and both office copy and fair copy of the bill agree with each other.
(e) The particulars of the beneficiary in respect of this bill have been verified and entered correctly in the IFMS Beneficiary Master.

Station: Dated 20 Signature of the D.D.O.

Designation

State Urban Development Agency