

## राजस्थान सरकार वित्त विभाग (सामान्य वित्तीय एवं लेखा नियम अनुभाग)

क्रमांक : प.1(२)वित्त / साविलेनि / 2005

जयपुर, दिनांक : 18.01. 2018

# आदेश

विषय : सामान्य वित्तीय एवं लेखा नियमों के खण्ड-11 में संशोधन

राज्यपाल महोदय सामान्य वित्तीय एवं लेखा नियमों के खण्ड—II में निम्न संशोधन करने के आदेश एतदद्वारा प्रदान करते हैं:—

1. After the existing New Form No. GA 110, New Form No. GA 110A, 110B, 110C and 110D shall be inserted (as enclosed).

This amendment shall be effective with immediate effect.

Encl.: As above Formats of New GA 110A to 110D Forms.

आज्ञा से, ( उषस्पति त्रिपाठी ) शासन संयुक्त सचिव

प्रतिलिपि निम्नलिखित को सूचनार्थ, आवश्यक कार्यवाही एवं अपने अधीनस्थ कार्यालयों को सूचित करने हेतु प्रेषित है :-

1. निजी सचिव, राज्यपाल / मुख्यमंत्री / समस्त मंत्रीगण / राज्य मंत्रीगण ।

- 2. निजी सचिव, मुख्य सचिव/अति. मुख्य सचिव/समस्त प्रमुख शासन सचिव/समस्त शासन सचिव/ समस्त विशिष्ट शासन सचिव।
- 3. सचिव, राजस्थान विधान सभा, राजस्थान, जयपुर ।
- 4. सचिव, लोकायुक्त सचिवालय, राजस्थान, जयपुर ।
- 5. सचिव, राजस्थानं लोक सेवा आयोग, अजमेर ।
- 6. समस्त उप शासन सचिव/सचिवालय के समस्त अनुभाग/विभाग।
- 7. प्रधान महालेखाकार (सिविल लेखा परीक्षा) राजस्थान, जयपुर ।
- महालेखाकार (प्राप्ति एवं वाणिज्यिक लेखा परीक्षा)/(ए एण्ड ई) राजस्थान, जयपुर ।
- 9. समस्त जिला कलक्टर/संभागीय आयुक्त/ विभागाध्यक्ष।
- 10. आयुवत, वाणिज्यिक कर विभाग को प्रेषित कर लेख है कि इन संशोधनों बाबत् सभी संबंधित अधिकारियों को सम्यक् रूप से जागरूक (sensitize) कराना सुनिश्चित करावें।
- 11. निदेशक, कोष एवं लेखा विभाग, राजस्थान, जयपुर इन संशोधनों बाबत् सभी संबंधित अधिकारियों को उचित रूप से जागरूक (sensitize) कराना सुनिश्चित करावें।
- 12. पंजीयक, राजस्थान उच्च न्यायालय, जोधपुर/जयपुर ।
- 13. समस्त कोषाधिकारी / उपकोषाधिकारी, राजस्थान।
- 14. कार्मिक एवं प्रशासनिक सुधार विभाग(कोडीफिकेशन) अतिरिक्त प्रति सहित ।
- 15. पंजीयक, राजस्थान सिविल सेवा अपील अधिकरण, जयपुर ।
- 16. विधि रचना संगठन को भेजकर लेख है कि इस आदेश / परिपत्र का हिन्दी अनुवाद करवाकर इस विभाग को अविलम्ब भिजवायें ताकि हिन्दी अनुवाद प्रेषित किया जा सके ।
- 17. अतिरिक्त निदेशक, वित्त विभाग को भेजकर लेख है कि वित्त (समन्वय) विभाग के आदेश संख्या प.17 (1) वित्त (समन्वय) / 04 दिनांक 22. 6.2004 के क्रम में इस परिपन्न को वित्त विभाग की वेबसाइट पर प्रकाशित करवाने की व्यवस्था करावें!

**(हरीश लिड्ढा)** मुख्य लेखाधिकारी

(GF&AR - 3 /2018)

FORM - XVI			<u> </u>	N.	ew Form No. GA 110 A
[See Clause 7 – RIPS 2010]	Governme	ent of Rajastl	han		le 287 a(1)
Reference No.	RIPS-2010 Subsidy Bill For Inve				
Detailed CTD Bill for Grant of Subs		Surient Subs	Office ID:	et) ivionthi i	ear:
Bill No.: Date:	DDO Code:	Nama	of DDO	Ob:	
					ect Head :
Budget Head: 0000-00-000-00-00 5	F/CA V/C Demand No.: 00	State Fund :	0.00 Central	Assistance : 0.00	TAN No. :
To					
The Treasury Officer, (Conc Please Order to pay Rs	erning Treasury) as per claim contained	l in this bill.		·	
	Sig	ın of Clerk	Sign of Jr.AC		Sign (With Seal)/ e-Sign/ gital Sign of DDO/CSDO
<ol><li>It is further certified that</li></ol>	this bill has not been drawn earlier. I have personally ensured observance e/Payees is/are correct, as per the rec		s regarding neces	sary entries.	
•					Sign (With Seal)/ e-Sign/ gital Sign of DDO/CSDO
I Certify that the Compliance of Dir & AR has been ensured.	ections/ Instructions under the provision	ons of GF		Treasury Vouch	<u>er</u>
Amount of Subsidy : Sanction Order No. : Sanction Order Date :		No	Pay Rs. :	For Treasury Us	Date : se
			n words) :		
			n Cash) :		
Sign	(With Seal)/ e-Sign/ Digital Sign of D	DO/CSDO			
For Acco	untant General Office	То	otal Credit Rs.		
Admitted (RS.)	Objected (RS.)				
Auditor Su			ıditor	AAO-I/II	Treasury Officer
Disclaimer: All contents related to this I Group Name:	oill are provided by Head of Office/DDO a	and he/ she is sole Print Date & Tin			

			Govern	ment of Raj	aethan			-	
Reference	No.	RIPS-201	10 Subsidy Bill F			(Innei	r Sheet) Mont	h/Year :	
Detailed C	TD Bill for Grant of Su	ubsidy: (Office N	Vame)			Office	ID:		
Bill No. :	Date:		DDO Code:	N	lame of DDO	:	Obj	ect Head :	
Budget He	ad: 0000-00-000-00-0	0 SF/CA V/C	Demand No.: 00	State Fu	ınd : 0.00	Cent	ral Assistance : 0.00	TAN No. :	
S.No.	Name of Enterprise & TIN No./GSTIN	Bank Name & Bank A/C No.	Sanction Date	Order No. &	Period of G	Grant	Amount of Subsidy	Total Amount	
1.				·					-
					Т	otal			
Γotal Am	ount :	st.				· · · · · ·			
Amount ir	n words :								
Certificat	es:								
1. 2. <b>3.</b>	Third Party included Bill. It is further certif	l in this bill are stri led that I have per lon including Bank	ctly in accordance v sonally ensured obs Account Details in	vith rules and the servance of all this bill has bee	nat the said In formalities reg en checked ar	idividua garding id veri	aim that the CTD Paym al/ Third Party are entit g necessary entries. fied.	ent Bill of the Individual led to such CTD Payr	iual/ nent

Sign (With Seal)/e-Sign/ Digital Sign of DDO/CSDO

Disclaimer: All contents related to this bill are provided by Head of Office/DDO and he/ she is solely responsible for it.

Group Name:

Print Date & Time:

				•		,
FORM - XVII					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	New Form No. GA 110 B
[See Clause 7 – RIP:			ent of Raj			Rule 287 a(1)
Reference No.	RIPS-2010 Su	bsidy Bill For Emplo	yment Ge	neration Sເ	bsidy (Outer Sheet	) Month/Year :
Detailed CTD Bill for	or Grant of Subsidy: (Office N	ame)		Office II		
Bill No. :	Date :	DDO Code:	Na	ame of DDO		Object Head :
Budget Head: 0000-	-00-000-00-00 SF/CA V/C	Demand No. : 00	State Fu	ınd : 0.00	Central Assistance : (	•
То						
	Officer, (Concerning Treas to pay Rs		d in this bill			
Certificates :		Si	gn of Clerk	Sigr	of Jr.ACC/AAO-I/II	Sign (With Seal)/ e-Sign Digital Sign of DDO/CSDO
<ol><li>It is furth</li></ol>	ount claimed in this bill has no ner certified that I have person nk detail of Payee/Payees is/ar	ally ensured observance	e of all forma cord.	alities regardi	ng necessary entries.	Sign (With Seal)/ e-Sign Digital Sign of DDO/CSDO
Cortify that the Co	ampliance of Directions/ Instru	4:	5.05			Digital Sign of DDO/CSDO
& AR has been ens	ompliance of Directions/ Instructions/	cuons under the provision	ons of GF		Treasury Vo	oucher
Amount of Subsidy	1			No.	For Treasu	Date :
Sanction Order No. Sanction Order Date						
Sanction Order Da		·		Pay Rs. (In words)	*	
				(In Cash) (In words)	:	
	Sign (With Seal)/ e-	-Sign/ Digital Sign of D	DDO/CSDO			
	For Accountant Gener	al Office	16 - THE CARLOW SECURE AND THE CONTRACT OF THE CARLOW SECURE AND T	Total Credi	t Rs.	·
Admitted (RS.)		Objected (RS.)				
Auditor	Supdt.	Gaz. officer	1	Auditor	AAO-I/II	Treasury Officer
Disclaimer: All conten	ts related to this bill are provided	by Head of Office/DDO			ible for it.	
Group Name:			Print Date &	Time:		

Government of Rajasthan  Reference No. RIPS-2010 Subsidy Bill For Employment Generation Subsidy (Inner Sheet)								Month/Year :	
Detailed C	TD Bill for Grant of Su						Office		ivolition can :
Bill No.: Date:			DDO Code :		N	Name of DDO :		Ob	ject Head :
Budget Head: 0000-00-000-00 SF/CA V/C			Demand No.: 00		State Fund : 0.00 Ce		Cer	ntral Assistance : 0.00	TAN No.:
S.No.	Name of Enterprise & TIN No./GSTIN	Bank Name & Bank A/C No.		Sanction Orde Date	er No. &	Period of Gr	ant	Amount of Subsidy	Total Amount
1.									
						10	otal	,	
Total Am	ount:	<u> </u>				!			1

#### Certificates:

- 1. Certified that I have personally examined and satisfied myself about the genuineness of claim that the CTD Payment Bill of the Individual/ Third Party included in this bill are strictly in accordance with rules and that the said Individual/ Third Party are entitled to such CTD Payment Bill. It is further certified that I have personally ensured observance of all formalities regarding necessary entries.
- 2. All required information including Bank Account Details in this bill has been checked and verified.
- 3. It is certify that I have carefully examined & verified the master data of the said claim.

Sign (With Seal)/e-Sign/ Digital Sign of DDO/CSDO

Disclaimer: All contents related to this bill are provided by Head of Office/DDO and he/ she is solely responsible for it.

Group Name: Print Date & Time:



Print Date & Time:

Group Name:

Reference	e No.	RIPS-20	Governm 14 Subsidy Bill Fo	nent of Raj or Investme		(Inner S	Sheet) Mont	h/Year :
Detailed C	TD Bill for Grant of Su	ubsidy: (Office N	lame)		·	Office ID	D :	
Bill No. :	Date :	, , , , , , , , , , , , , , , , , , , ,	DDO Code:	1	lame of DDO		Obje	ect Head :
Budget He	ad: 0000-00-000-00-0	0 SF/CA V/C	Demand No.: 00	State Fu	ınd : 0.00	Central	Assistance : 0.00	TAN No.:
S.No.	Name of Enterprise & TIN No./GSTIN	Bank Name & Bank A/C No.	Sanction O Date	rder No. &	Period of G	rant A	Amount of Subsidy	Total Amount
Total Am	ount :				Т	otal		
Total Am				·				

#### Certificates:

- 1. Certified that I have personally examined and satisfied myself about the genuineness of claim that the CTD Payment Bill of the Individual/ Third Party included in this bill are strictly in accordance with rules and that the said Individual/ Third Party are entitled to such CTD Payment Bill. It is further certified that I have personally ensured observance of all formalities regarding necessary entries.
- 2. All required information including Bank Account Details in this bill has been checked and verified.
- 3. It is certify that I have carefully examined & verified the master data of the said claim.

Sign (With Seal)/e-Sign/ Digital Sign of DDO/CSDO

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Group Name:

Print Date & Time:



FORM - XLI				<del></del> ,		New Form No. GA 110 D
[See Clause 12.2 ·	– RIPS 2014]	Govern	ment of R	aiasthan		Rule 287 a(1)
Reference No.	RIPS-2014 Sub				bsidy (Outer Sheet)	Month/Year:
Detailed CTD Bill	for Grant of Subsidy: (Office N	ame)	<u></u>	Office I	D :	
Bill No. :	Date :	DDO Code:	Na	me of DDO	•	Object Head :
	00-00-000-00-00 SF/CA V/C	Demand No.: 00	State Fur	nd : 0.00	Central Assistance : 0	.00 TAN No. :
To The Treasu Please Orde	ry Officer, (Concerning Treas er to pay Rs	sury) as per claim containe	d in this bill.			
Certificates :		Si	gn of Clerk	Sig	n of Jr.ACC/AAO-I/II	Sign (With Seal)/ e-Sign Digital Sign of DDO/CSDO
2. It is fu	Amount claimed in this bill has no urther certified that I have person Bank detail of Payee/Payees is/a	ally ensured observance	e of all formal cord.	lities regard	ng necessary entries.	Sign (With Seal)/ e-Sign
I Cortify that the	Compliance of Disagraphy (1)					Digital Sign of DDO/CSDC
& AR has been e	Compliance of Directions/ Instruensured.	ctions under the provision	ons of GF		Treasury Vo	oucher
Amount of Subsi- Sanction Order N Sanction Order D	dy : No. :			No. Pay Rs.	<u>For Treasur</u>	Date : <u>y Use</u>
				(In words) (In Cash) (In words)	:	
	Sign (With Seal)/ e	-Sign/ Digital Sign of D	DDO/CSDO			•
What have been a second of the	For Accountant Gener	ral Office	PROC	Total Cred	it Rs.	
Admitted (RS.)		Objected (RS.)				
Auditor	Supdt.	Gaz. officer		Auditor	AAO-I/II	Treasury Officer
Disclaimer: All cont Group Name:	tents related to this bill are provided	by Head of Office/DDO a	and he/ she is s Print Date &		sible for it.	<del></del>

Government of Rajasthan  Reference No. RIPS-2014 Subsidy Bill For Employment Generation Subsidy (Inner Sheet)							Month/Year :
Detailed C	TD Bill for Grant of Su	ubsidy: (Office N	lame)				
Bill No.: Date:			DDO Code:	N	Name of DDO :	Obj	ect Head :
Budget He	ead: 0000-00-000-00 SF/CA V/C Demand No.: 00 State Fund: 0.00 Central Assistance: 0.00		TAN No. :				
S.No.	Name of Enterprise & TIN No./GSTIN	Bank Name & Bank A/C No.	Sanction Ord Date	er No. &	Period of Grant	Amount of Subsidy	Total Amount
1.							
					Total		

Amount in words:

### Certificates:

- 1. Certified that I have personally examined and satisfied myself about the genuineness of claim that the CTD Payment Bill of the Individual/ Third Party included in this bill are strictly in accordance with rules and that the said Individual/ Third Party are entitled to such CTD Payment Bill. It is further certified that I have personally ensured observance of all formalities regarding necessary entries.
- 2. All required information including Bank Account Details in this bill has been checked and verified.
- 3. It is certify that I have carefully examined & verified the master data of the said claim.

Sign (With Seal)/e-Sign/ Digital Sign of DDO/CSDO

Disclaimer: All contents related to this bill are provided by Head of Office/DDO and he/ she is solely responsible for it.

Group Name: Print Date & Time:

