

**PROFORMA**

**INDIAN COUNCIL OF AGRICULTURAL RESEARCH**

**Name of the Institute:** NATIONAL INSTITUTE OF ANIMAL NUTRITION &  
PHYSIOLOGY, ADUGODI, BANGALORE – 560 030

**BILL FOR REFUND OF DEPOSITS**

1. Name of the party depositing the amount :
2. On what account received :
3. Amount of deposit :
4. Receipt No. & Date :
5. Date of deposit into the Bank :
6. Head of Account to which credited :
7. Amount to be refunded :
8. Head of Account to which dubitable :
9. Name of the payee :

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**Certified that:**

- (i) The object for which the deposit was taken has been achieved and the Security / earnest money / caution money is refundable.
- (ii) This Institute has not allotted or accepted the rates of tender to the firm, hence no necessary of keeping the earnest money/security deposit of the firm henceforth.
- (iii) Sanction of the competent authority to the refund of the deposits have been vide S.O. \_\_\_\_\_ dt. \_\_\_\_\_.

P.T.O.

Passed for Payment Rs. _____ (Rupees _____ _____ only)  Asst. Admn. Officer.
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For the use of Audit and Accounts Branch AB/BR No. \_\_\_\_\_ Dt. \_\_\_\_\_

Verified from the Main Cash Book, Original entry of the receipt of deposit appears at page \_\_\_\_\_ of cash book. A note of refund against the original entry has been kept.

Verified from the Register of deposit and necessary entries regarding refund made therein.

**Signature of the Assistant Finance &  
Accounts Officer**

Pay Rupees \_\_\_\_\_

Vr. No. & Date :

**Note :** (a) In the case of the non-production of receipt, a certificate may be hand from the party for depositing the amount to the effect that (I) the original receipt has been lost, (ii) a second claim will not be preferred if the original receipt is found at a later date.

(b) The refund Vr. Date may be quoted by the Audit & Accounts Branch on the original receipt / acknowledgments.