

3030 21000341

View Contingent Bill

Help

Disbursement Type* Bill Type*

Reference Number for Cash Branch Bill Date*

Fund* Segment* Sub Segment*

Field* Sub Field*

Functionary* Sanctioned On*

Sanction By*

Sanction Details

Created By Verified By

Confirmed By Approved By

Bill Status

Narration

Remarks

Function Name	Account Code*	Account Head	Amount*	Details
Public Health	2101000	SALARIES,WAGES AND BONUS	53618	Click

Gross	53618
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Deductions			
Account Code	Account Head	Amount	Details
		0	Click

Deductions	0
Net Payable	53618

Net Payable in words

* - Mandatory Fields

