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**View Contingent Bill**

Help

Disbursement Type\*  Bill Type\*

Reference Number for Cash Branch

Fund\*  Bill Date\*

Segment\*  Sub Segment\*

Field\*  Sub Field\*

Functionary\*

Sanction By\*  Sanctioned On \*

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	26942	Click

Gross

Deductions

Account Code	Account Head	Amount	Details
		0	Click

Deductions

Net Payable

Net Payable in words

\* - Mandatory Fields











