



## Indian Institute of Technology Kanpur Office of the Dean Students' Affairs

### Direct Payment Form

<b>Type of Procurement:</b> (Please tick, as applicable)	1. <b>GFR</b> (up to ₹ 50,000/-) <input type="checkbox"/> 2. <b>Non-Govt Fund</b> (up to ₹ 50,000/-) <input type="checkbox"/>
<b>Account Name:</b>	<b>Antaragni</b> <input type="checkbox"/> <b>Techkriti</b> <input type="checkbox"/> <b>Udghosh</b> <input type="checkbox"/> <b>Other</b> <input type="checkbox"/>
<b>Budget Head:</b> (Please tick one)	Consumable <input type="checkbox"/> Travel <input type="checkbox"/> Misc <input type="checkbox"/> Non-Consumable <input type="checkbox"/> Any other budget head as per sanction letter (Please specify) .....

### Payment Type

In case of <b>Vendor payment</b> , please fill the following:	In case of <b>Reimbursement</b> , please fill the following:
Vendor Name:	P.F. No./ Roll No.:
Vendor's Bank Details:	Name:
Bank Name:	Reason(s) for the Reimbursement:
A/C No:	
IFS Code:	
Branch:	

### Details of the bill(s) submitted for payments/ reimbursement

SN.	Invoice/ Bill Details		Stock Register Details		Details of the goods purchased	Amount (Rs.)
	Number	Date	Page No.	Stock Type (Cons/ Non-Cons/LTAS)		
1.						
2.						
3.						
4.						
5.						
<b>Total Amount</b>						

#### Declaration:

I am personally satisfied that these goods purchased are of the requisite quality and specification and have been purchased from a reliable supplier at the reasonable price. (Rule 154 of GFR 2017).

- 1) That the reasons quoted for the reimbursement are genuine and purchase made from personal resources was unavoidable.
- 2) The total amount be transferred to the beneficiary bank account as mentioned above.

(Head, Finance)

(Dy. Chair, Finance)

(Festival Chairman)

#### For Office Use

Amount (filled by Gymkhana Office)	Rs.	Available Balance (filled by Gymkhana Office)	
<b>Bill Checked</b>			
<b>Gymkhana Office</b>		<b>Dealing Assistant (DOSA Office)</b>	