

RK 101

అంధ్ర ప్రదేశ్ ఖజానా నియమావళి నమూనా APTC FORM-40

BILL FOR WITHDRAWAL FROM GPS/GIS/FBF/EFW/LOANS AND ADVANCES

For the Month & Year 01 2026

Bill For: G.R.F. Rimal Payment

జిల్లా / Dist. D.R. B.R. Ambedkar Konapuram

(For Treasury Use only)

Date: _____

కార్యాలయ బిల్లు నెంబరు / D.D.O's T.B.R. No. _____

Trans ID: 2025-246078

TREASURY/PAO CODE

0304

పెద్ద పద్దు

Major Head

8009

DDO Code

03042602003

ఉప పెద్ద పద్దు

Sub major Head

01

DDO Designation: Executive Engineer

చిన్న పద్దు

Minor Head

101

DDO Office Name: 96 Line (E.R.B.)

సామూహిక ఉప పద్దు

Group Sub Head

-

Bank Branch

0803

ఉప పద్దు

Sub Head

01

Code

సవివరమైన పద్దు

Detailed Head

Bank Branch Name: SBI, Amalapuram

ఉప సవివరమైన పద్దు

Sub Detailed Head

Non-plan =N/Plan=p :

N

Charged =C/Voted =v :

V

Contingency Fund MH/

Service Major Head

ఈ బిల్లు మొత్తాన్ని రూ॥ 20,996/- (అక్షరాలా Twenty thousand

Nine hundred and ninety Six only

రూపాయలు మాత్రమే) ఈ నగదు / చెక్కు / డ్రాఫ్ట్ ఖాతా జమ / సర్దు

బాటు ద్వారా చెల్లించండి.

పైకము ముద్దినది.

Executive Engineer (R&B)
(R&B) Division, AmalapuramExecutive Engineer (R&B)
(R&B) Division, Amalapuram2
27/1/26

FOR USE IN TREASURY/PAY & ACCOUNTS OFFICE ONLY

Pay Rs. (Rupees

..... only) by Cash /Cheque /Draft/ Account Credit adjustment.

NBST/
Bank
Seal

Treasury Officer / pay& Accounts Officer

(P.T.O.)

Sl. No.	Name & Designation / Subscriber / Employee or Nominee	Pay Rs.	Account No.	No. & Date of Sanction of the proceedings	Nature & Amount of withdrawal		Remarks
					Final / part final payment Rs.	Advance Rs.	
1	2	3	4	5	6	7	8
①	G. V. R. A. Kumar Senior Asst (PH) Gfms - 14064029	87480	47550	600. A/N 14367AD R004/01/25 44 87, 4 10/11/25	20996/-	-	-
TOTAL					20996/-		
<p>② Certified that the bill was duly examined and found correct.</p> <p>Executive Engineer (R&B) (R&B) Division, Amalapuram</p> <p>27/11/25</p>							
<p>Designation of the Sanctioning Authority.....</p> <p>Note : Original Sanction order should be enclosed.</p>							
<p>బడ్జెట్ వివరాలు</p> <p>1. సంవత్సరానికి బడ్జెట్ కేటాయింపు రూ </p> <p>2. ఈ బిల్లుతో సహా అయిన వ్యయం రూ </p> <p>3. నిలవ రూ </p>							
<p>అకౌంటెంటు జనరల్ కార్యాలయ ఉపమోగార్థం</p> <p>Executive Engineer (R&B) (R&B) Division, Amalapuram</p> <p>27/11/25</p>							

ANNEXURE

Branch.

in the office of

Particulars of amounts refunded: -

Serial Number	Name of Subscriber & Designation	Fund Account Number	Date of Drawl	Particulars of amount Drawn	Amount now refund
			Total		

Signature of Drawing Officer

Signature _____
Executive Engineer (M&B)

22/1/06 ✓

Signature of Drawing Officer

Designation

Signature _____

(R&B) Division, Amalapuram

Station: _____
Date: _____
Contents received: _____
Signature of messenger: _____
Please pay to _____

Certified that I have satisfied myself that all sums included in bills (Form No. 40-A), drawn one month / two months / three months previous to this date in favour of Messrs. _____ Account No. _____ with the exception of those detailed * (of which the total has been refunded by deduction in his bill have been disbursed to the proper persons) and that their acquaintances have been taken and filed in my office with receipt stamp duly cancelled for every payment in excess of Rs. 20 _____

2. Certified that the balance in the fund at _____ My credit _____ on the date of withdrawal covers the sum drawn in the bill. The credit of the subscriber _____

3. Certified that the _____ Policy No. _____ with _____ Co. _____ have already been assigned in favour of the Governor of Andhra Pradesh and forwarded to the Accountant. The policies detailed below: -

General, Andhra Pradesh, for safe custody / the details of the policy / policies proposed to be taken up have been communicated to and accepted by the Accountant General, Andhra Pradesh In his Letter No. _____ dated _____

Serial Number	Name of subscriber With fund Account Number	No. of Policy	Name of Company	Amount of Premium	Due date of Premium	Stock Number
1.						
2.						
3.						
4.						
5.						

4. Certified that in respect of withdrawals made in bills (Form No. 40-A), one month / two months / three months previous of the date towards payment of the insurance Premium the original premium receipt have be, within one month of the date of withdrawal _____ forwarded to the Accountant-General, Andhra Pradesh.

Relating to _____ Rs. _____ and that necessary endorsements have been made on the receipts to the effect that no abatement of income tax is admissible. duly produced to me. for scrutiny with the exception of those

Signature _____ Pay Rs. 20,000/- (Rupees) Twenty thousand only
Treasury Accounts Officer _____
Examined and entered _____ Accountant _____

Item _____ of _____ Rs. _____ For use in Audit Office
Admitted ...
Objected ...
Total ...
Auditor: _____ Accountant _____
Details of objection, if any _____
Executive Engineer (R&B) _____
27/1/26

Note: - The bills for withdrawal of advances/ final withdrawals should be supported by a duly certified copy of the sanction in proper forms/ the letter of authority issued by the Audit Officer. In the case of Non-Gazetted Government servants the copy should be attested by the head of the office. In the case of bills for withdrawal payment of Insurance premium reference to the letter of authority issued by the Audit Officer permitting the withdrawal should be quoted as also reference to the stock number allotted to the policy assigned in favour of the Governor of Andhra Pradesh and sent to the Audit Office for safe custody.



OFFICE OF THE PRINCIPAL ACCOUNTANT GENERAL (A&E),

ANDHRA PRADESH, VIJAYAWADA - 520 002.

Lr No.AG(A&E) AP/ FP02/01/2025-2026/4487
To

Dt. 10/11/2025

ANJANI KUMAR G V R
BRAHIN AGRAHARAM, D.NO.3-146/7,
MADHAVAPATNAM,
KAKINADA,
KAKINADA DIST. 533 201
9440495422e Authorisation DDO copy sent to
eerbamp@yahoo.co.in

Sir/Madam,

With reference to EXECUTIVE ENGINEER, Circle Office (Distri Letter No GPF/EC1/2025 Dated 18-MAR-25 intimating that Sri/Smt ANJANI KUMAR G V R retired from the service on 30-JUN-25 and asking for payment of the amount at credit in his/her Account No PWWC/77550 on that date, I request you to submit a claim for a sum of Rs.20996 (Rupees Twenty Thousand Nine Hundred Ninety Six Only) representing the amount of residual deposits (without any interest) by presenting a bill in Form APTC 40-A at the DEPUTY DIRECTOR, O/O DIST TREASURY, KONASEEMA AT AMALAPURAM.

2. The disbursement should be made in terms of Rules 28/30 of the A.P.G.P. Fund Rules.
3. The amount should be paid to the persons named below in the proportions mentioned against each.

ANJANI KUMAR G V R (FULL)

4. The payee should be informed that he/she shall have to accept the amount as tendered and that no further interest will be allowed.

5. Authorisation was sent to your department vide Lr.No. PAG(A&E)/AP/FP02/ 01/ 2025-2026/4485 and DEPUTY DIRECTOR, O/O DIST TREASURY, KONASEEMA AT AMALAPURAM has been advised accordingly vide Lr.No PAG(A&E)/AP/ FP02/ 01/ 2025-2026/ 4486 dated 10-NOV-25.

6. The following TA/PFW amounts drawn after issue of last GPF slip have been taken into account while authorising the payment. Any additional withdrawals made may be recovered with interest before making payment.

Month	Amount	TA/PFW

7. Validity of this authorisation is from 11-NOV-25 to 10-MAY-26

NOTE :- The DDO to ensure the non drawal of any TAs/PFWs after submission of the FW application, before submission of the bill under this authorization.

Yours faithfully,

Sr. Accounts Officer

Passed for Rs. 20,996/- Rupees Twenty thousand
nine hundred and ninety six only

27/11/26

Executive Engineer (R&B).
(R&B) Division, AmalapuramDigitally signed by SUSARLA NAGA
MUSALI
Date: 2025.11.10 12:44:30 +05:30
Reason: Digital Authentication
Location: Whole Document