

**ASSAM UNIVERSITY:: SILCHAR  
FINANCE DEPARTMENT**

**Circular**

**SUBJECT: - IMPLEMENTATION OF RE-DESIGNED FORM FA-I FOR SPONSORED  
/RESEARCH PROJECT-REGARDING**

It is for information of all concerned that Expenditure Sanction Order Form FA-I is re-designed for Sponsored /Research Project. Hence forth all Principal Investigators/ Co-ordinators / Project Directors are informed that any payment related to Sponsored/Research Projects are to be conveyed/placed to Finance in the newly designed FORM FA-1(P) (enclosed) . Payment placed in the old format of FA-I will not be made hereafter .

This issues with the approval of the Competent Authority.

**Assistant Registrar (Finance)  
Assam University, Silchar**

Date: 04.07.2024

File No. AUF/PFC/MISC/2024

Copy to:-

- 1) All Heads of Department for information & with a requested to inform the All PIs/ Coordinators/PDs within the concern Department.
- 2) P.S. to V.C. for kind information of the Vice Chancellor
- 3) P.S. to Registrar for kind information of the Registrar
- 4) Director Computer Centre for information & with a request to upload in the University website in pdf form
- 5) DR (Aca) / DR ( Research & Fellowship Cell) for information
- 6) File

**Assistant Registrar (Finance)  
Assam University, Silchar**

# ASSAM UNIVERSITY, SILCHAR

**FORM:FA-1(P)**

## EXPENDITURE SANCTION ORDER FORM (FA-I)

(FOR SPONSORED/RESEARCH PROJECTS)

Project Name: \_\_\_\_\_

### (A) Sanction Details:

1 Department / Section: \_\_\_\_\_ 6. Date of Sanction: \_\_\_\_\_  
2 **RPMS-ID:** \_\_\_\_\_ 7. Sanctioned Amount : \_\_\_\_\_  
3 File No: \_\_\_\_\_  
4 Note Sheet page No. : \_\_\_\_\_  
5 Purpose : \_\_\_\_\_

### (B) Details of Bank Account:

1. Financial Year: \_\_\_\_\_  
2. Payment Type (Please select): Recurring  Non-Recurring   
3. Scheme Code: \_\_\_\_\_  
4. Bank A/C no of Project: \_\_\_\_\_

### (C) Details of Advance (In case of advance only):

1. Advance Drawn: Rs. \_\_\_\_\_  
2. Adjustment Accepted: Rs. \_\_\_\_\_  
3 Net Amount payable: Rs. \_\_\_\_\_

### (D) Details of Payee:

Sl. No	Name of the Claimant	Bank Name	Account No	IFS Code	Amount (in Rs. )
1					
2					
3					
4	Income Tax Officer, Silchar (YOURSELF)				
5	Asstt. Commissioner of Taxes				
6	The Labour Commissioner- CUM- Member Secretary, Labour Cess				
				<b>Grand Total</b>	

PAN of Claimant (Mandatory for Income Tax Deduction)	
GST No:	
Mobile no. of Claimant	

Certified that all conditions of procurement of goods / services relating to the claim(s) have been satisfied.  
Photo copy of complete note in connection with sanction of above expenditure is enclosed.

Forwarded to the Finance officer (in duplicate) for payment along with original bills and all relevant documents.

Signature and seal of Authority

File No.:

Date:

### FOR USE IN FINANCE DEPARTMENT

CASH UNIT			ACCOUNTS UNIT	
1	Bank A/C No		5. Entered in Tally on	
2	AD / Cheque No		6. Payment Vr. No.	
3	Date			
4	Voucher No.			
	Signature of Cashier			Signature of Dealing Asstt.

Checked and found correct

Verified

Admitted / Not Admitted

Section Officer (R&P)

Assistant Registrar

DDO

Finance Officer

N.B. 1. Canceled cheque of payee should be attached with the FA-I. (Not applicable for A.U. Employees)

2. If cheque is not having the name of bank holder then Photo copy of the page of Bank pass book containing details of Bank accounts number, IFS code duly attested by the payee.

( The above FA-I form may be submitted in printed form to avoid confusion )