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Agency's Copy (Branch Acknowledgement)

To,
NATIONAL INSTITUTE OF AYURVED

Ref: Account No. 1402150011

Payment Advice Number C051900334995

We confirm having received the captioned advice of credit(s) for payment today for further processing as per arrangement of bank on integrated PFMS-Bank payment system.

No. Of Beneficiaries : 1

Date & Time :

Amount (in Rs.) : 1500000.00

CENTRAL BANK OF INDIA

Branch Seal



Branch Authorized Official

Agency to enter date of delivery in PFMS using option | E-Payment => PPA Submission Status

Handwritten signature in green ink

303 308

TO BE PAID THROUGH SYSTEM ONLY

PFMS Generated Print Payment Advice

Approval date in PFMS: 09 May 2019	Payment Advice No.: C051900334995
Expiry date of PPA PFMS: 19 May 2019	Advice Print Date : 09 May 2019
PAN No. : JPRN00384-G	TAN No.:
Note For Branch:	
Contact Details	BANK
Name:	Mr.G.N.Lavangare
Email :	bmmums2684@centralbank.co.in
Phone No. :	022-22626127,022-22677804,022-22625013
Date:	011-23343860

The Branch Head
CENTRAL BANK OF INDIA
NATIONAL INS AYURVEDA, JAIPUR Branch

We authorise the bank to debit our undernoted account maintained with the bank with batch amount and credit the beneficiary(ies) [#1] as per ANNEXURE-I uploaded to bank's central system through PFMS O/o CGA.

Bank Account No. 1402150011

Total Amount of Debit : Rs 1500000.00

(Amount in words : Fifteen Lakhs)

Batch No. C051900334995

No. Of Beneficiaries as per Annexure-I.

Agency Seal

(Sign by Authorized Signatory)

Name: Sr. Accounts Officer
National Institute of Ayurveda,
Jaipur-02

Mobile No -

(Sign by Authorized Signatory)

Name: रस एवं वैद्यक कल्याण विभाग
राज्य आयुर्वेद विभाग, जयपुर

Designation -

Mobile No -

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ANNEXURE -I

(All page to be stamped and initial and last page to be signed in FULL with stamp)

Payment Advice No.: C051900334995

Sr.No.	Name of Beneficiary	PFMS Txn ID	Account Number	IFSC/IIN/MICR Code	Aadhaar Number	Amount(In Rs.)
1	UNIVERSITY GRANTS COMMISSION	C051900335117	xxxxxxxxxxxx9846	CBIN0280306		1,500,000.00
Total Amount(Rs)						1500000.00

Please acknowledge and do the needful as prescribed by bank to complete transactions.

sk

PFMS