



Form of Utilization Certificate for Training Expenditure
(To be signed by Nodal Officer & Chartered Accountant)

Sl.No.	Letter No. and date	Amount	Certified that out of Rs. _ _____ Lakhs of advance sanctioned during the year _____ in favour of Nodal Officer, "Agri-Clinic & Agri-Business Centre Scheme" under this MANAGE / Department Letter No. given in the margin and Rs(_____) balance of the previous year, a sum of Rs _____ Lakhs has been utilized by the Nodal Officer, for the purpose of Agri-Clinic & Agri-Business Centre Scheme for which it was sanctioned and that the balance of Rs.(-)(____) excess utilized at the end of the year.

Certified that I have satisfied myself that the conditions on which the Advance was sanctioned have been duly fulfilled / are being fulfilled and that I have exercised to see that the money was actually utilized for the purpose for which it was sanctioned.

Signature

Designation Nodal Officer

Date

Chartered Accountant

Membership No. :

UDIN:

MANAGE

RECEIPTS & PAYMENTS ACCOUNT OF AGRI-CLINICS AND AGRI-BUSINESS CENTRE SCHEME, OF _ FOR THE TRAINING PROGRAMME No. _____ DURING _____ TO _____ for 45 days residential training programme. No. of Candidates :

RECEIPTS	(Rs.)	PAYMENTS	Admissible as per financial guidelines (Rs.)	Expenditure (Rs.)
To Amount Received from CAD, MANAGE		Food (300 X 45 Days)	13,500/- per trainee	
		Accommodation (200 X 45 Days)	9,000/- per trainee	
		Honorarium for Officers and staff of Nodal Training Institution	5,400/- per trainee	
		Training Expenditure (Training Expenditure Includes Hands on Training Expenditure, Honorarium, TA&DA for resource persons, study material, stationary, preparation of preliminary project reports, DPR's, field visits, monitoring etc.,)	9,000/- per trainee	
		Pre Training Expenditure	1,000/- per trainee	
		Total	37,900/- per trainee	
		Closing Balance Refunded		
TOTAL		GRAND TOTAL		

Certified that I have verified the vouchers / bills / books of accounts and satisfied myself that the conditions on which the Advance was sanctioned have been duly complied with and I am satisfied that the money was utilized for the purpose for which it was sanctioned.

Nodal Officer

**Chartered Accountant:
Membership No.:
UDIN:**