



भारतीय सूचना प्रौद्योगिकी संस्थान, नागपुर
Indian Institute of Information Technology, Nagpur

**Standard Operating Procedure
for
Settlement of Advances & Reimbursement
of Expense including TA & DA Claim.**

STANDARD OPERATING PROCEDURE FOR SETTLEMENT OF ADVANCE / REIMBURSEMENT OF EXPENSES.

1. Prior **Approval** of Expenditure to be incurred should be taken from Competent Authority with expected Expenditure Amount. Also at the time of submission of Advance settlement or reimbursement of Expenses if Expense incurred is more than approved amount an additional approval should be taken.
2. While settlement of Advance, fill advance settlement proforma, enclosed herewith as an **Annexure A**. While reimbursement of Expenses, fill reimbursement of expenses proforma, enclosed herewith as an **Annexure B**.
3. Make a note sheet with the summary of all original bills and the bills should be in proper sequence with self attested. It should have payment proof, original approval, report of seminar / workshop / event undergone or conducted.
4. It is advised to avoid payment in **Cash**. In case of Cash payment, signature of receiver of cash is required to take on the Cash receipt format, enclosed herewith as an **Annexure C**.
5. In case of computerized bills like Bus / Metro Tickets, Food Bills and etc, kindly take photocopy of all small original bills and original bills should be paste beside its photocopy in A4 page collectively.
6. In direct purchase, Intender should declared that goods have been received in good condition/ services have been rendered satisfactorily in satisfactory report, enclosed herewith as an **Annexure D**. Stock entry certificate is endorsed on the bills. In case of assets, the necessary entries have been made in Fixed Assets Registers.
7. **In case of advance settlement or reimbursement of Expenses for the Travelling Allowance & Daily Allowance (TA & DA) bills**, kindly note the following:
 - a) Air Tickets & Train Tickets should be booked from Balmer Lawrie & Company portal, Ashok Travels portal & Tours and Indian Railways Catering and Tourism Corporation (IRCTC) portal only.
 - b) Boarding pass need to be attached while travelling by Air.
 - c) Cab / Bus / Auto tickets or online payment proof should be attached for local travel.
 - d) Bills of foods should be attached or online payment proof should be attached.
 - e) The TD & DA bills should be submitted with proform of TA & DA Claim, enclosed herewith as an **Annexure E**.
8. Goods and Service Tax (GST) Invoices should be in the name of **The Director, IIIT Nagpur**. Institute **GST No. 27AAAI9958C1ZH** should be quoted in GST Invoice.
9. **Tax deducted at Source under Income Tax (TDS) & Tax deducted at Source under GST (TDS on GST)** should be deducted while doing the payment from invoice amount if the collective invoice amount is more than Rs. 30,000/- or regular Institute Vendor. (For Rates of Deduction Contact Accounts Department).
10. Advance should be settled within the 30 days from the date of event occurred, in case of delay settlement Interest of 7.10% is required to transfer at Institute Account for delay periods or Competent Authority approval is needed for its process.
11. It is advised to keep one photocopy of the entire set of bills and approval with you or your department.
12. Advance settlement proforma and bills should be submitted at Registrar Office for approval and further process.



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Survey No. 140,141/1, Behind Br. Sheshrao Wankhede Shetkari Soot Girni, Village :
 Waranga, Po: Dongargaon (Butibori), Tahsil : Nagpur (Rural), District : Nagpur -
 441108

Website: www.iiitn.ac.in Email: director@iiitn.ac.in, registrar@iiitn.ac.in
 Phone: 9405215010

दिनांक / Date:-

वसूली योग्य अग्रिम के भुगतान हेतु प्रारूप / Format For Settlement of Recoverable Advance

नाम / Name : - _____

पदनाम / Designation :- _____ विभाग / Dept. _____

अग्रिम स्वीकृत किया गया / Advance sanctioned on _____

वी.आर नंबर के माध्यम से / Vide Vr. No. _____

रुपये / For Rs. _____ (_____ केवल / Only)

लेखा शीर्ष A/c Head _____

अग्रिम राशि / Amount of Advance रु./Rs. _____

उपयोग की गई राशि / Amount Utilized रु./Rs. _____

शेष राशि लौटा दी गई / Balance Returned रु./Rs. _____

जिस कार्य के लिए अग्रिम राशि स्वीकृत की गयी थी, वह कार्य के लिए अग्रिम राशि खर्च हो गयी है /

The amount of Advance has been spent for which it was sanctioned.

दिनांक / Date:- _____

अग्रिम धारक के हस्ताक्षर / Signature of Advance

Holder

एचओडी के हस्ताक्षर / Signature of HOD

(कार्यालय के उपयोग के लिए ही / For Office Use Only)

वाउचर संख्या / Voucher No. _____ अग्रिम स्वीकृत की दिनांक / Advance Sanctioned on _____

अग्रिम भुगतान किया गया / Advance Settled on _____

अग्रिम की राशि / Amount of Advance रु./Rs. _____

उपयोग की गई राशि / Amount utilised रु./Rs. _____

शेष राशि लौटा दी गई / Balance returned रु./Rs. _____

देय शेष / Balance Payable रु./Rs. _____

सहायक कुलसचिव(लेखा) / Asst. Registrar (A/c)

कुलसचिव / Registrar

(स्वीकृत) Approved / (अस्वीकृत) Not Approved

निदेशक / Director



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व्यय की प्रतिपूर्ति के लिए बिल जमा करने का प्रारूप

Format For submission of bills for Reimbursement of Expenses (Without Advance)

नाम / Name : - _____ दिनांक / Date:- _____

पदनाम / Designation :- _____ विभाग / Dept. :- _____

किए गए व्यय का उद्देश्य / Purpose of Expense incurred _____

व्यय की कुल राशि / Total Amount of Expenses :- Rs. _____

I Certify that:

1. The above charge has been necessarily incurred in the interest of Institute and expenditure has been incurred for the purpose for which it was sanctioned.
2. The expenditure has been incurred by following the extant procedures. Direct purchase limit of Rs.50,000/- from single source has been adhered to. I am personally satisfied that these goods purchased are of requisite quality and specification and have been purchased from a reliable supplier at reasonable prices.
3. Copy of Financial approval is enclosed.
4. Goods have been received in good condition/ services have been rendered satisfactorily and stock entry certificate is endorsed on the bills. In case of assets, the necessary entries have been made in Dead Stock Registers.

You are requested to kindly pay the amount to Beneficiar(y/ies) listed below*.

Sr. No	Date	Bill No.	Vendor Name	Amount in Rs	Remark

(Signature of Applicant)

(Signature of HoD)

(Signature of AOSD)

(In case of Goods purchased only)

(Signature of Registrar / Asso. Dean)

(कार्यालय के उपयोग के लिए ही / For Office Use Only)

Put up for approval for reimbursement of Rs.

सहायक कुलसचिव(लेखा) / Asst. Registrar (A/c)

कुलसचिव /Registrar

(स्वीकृत) Approved / (अस्वीकृत) Not Approved

निदेशक / Director



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PO : Dongargaon(Butibori), District: Nagpur (Maharashtra)-441108

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नकद रसीद / CASH RECEIPT

दिनांक / Date:-

निदेशक, भारतीय सूचना प्रौद्योगिकी संस्थान, नागपुर की ओर से _____/- शब्दों में (रुपये
_____) की राशि संस्थान लिए आवश्यक काम
_____ के लिए प्राप्त हुई।

Received an amount of Rs: - _____/- (Rupees in word _____
from the Director, IIIT Nagpur towards _____
required for Institute.

हस्ताक्षर / Signature:-

नाम / Name: -



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दिनांक / Date:- / / 2025

संतोषजनक प्रमाणपत्र /SATISFACTORY CERTIFICATE

"में, _____ व्यक्तिगत रूप से संतुष्ट हूँ किये खरीदी गई सामग्री / सेवा आवश्यक गुणवत्ता और विशेषताकी है और इन्हें एक विश्वसनीय आपूर्तिकर्ता से एक सार्थक मूल्य पर खरीदा गया है"./“ I am personally satisfied that these goods / services purchased are of the requisite quality and specification and have been purchased from a reliable supplier at a reasonable price.” (Against Invoice no:-

खरीदार /Indenter(_____)