

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232

Memo no: 99/CCNAA

Date: 18/06/2014

To,
The Hall Pharmaceutical Distributer
97/99, Sri Arabinda Road
Howra-711106
West Bengal.

Sub:- Supply order of the Medicine under CBPHCS

Your quotation in the lowest rate has been accepted . You are hereby ordered to supply the following Medicines and equipments towards the Health Center under Coopers Camp Notified Area Authority under CBPHCS Programme within ten (10) days from the receipt of the office order letter.

Sl.No.	Name of medicines	Quantity
1	Tab Ibuprofen (400 mg)	5000 Tabs
2	Povidone Iodine oint	100 tubes
3	Tab Metronidazole(400mg)	5000 tabs
4	Tab Dicyclomine (20mg)	300 tabs
5	Tab Domperidone (10mg)	3000 tabs
6	Tab Cetirizine(10 mg)	1500 tabs
7	Tab Salbutamol(4 mg)	1000 tabs
8	Tab Glimeperide (2 mg)	2500 tabs
9	Tab Metformin (500 mg)	3000 tabs
10	Tab Amlodipine(5 mg)	2000 tabs
11	Tab Cefixime (50 mg)	600 tabs
12	Tab Cefixime (200 mg)	1500 tabs
13	Tab Fluconazole (150 mg)	60 tabs
14	Tab Alprozolam (0.5 mg)	800 tabs
15	Ciprofloxacin Eye Drop (0.3%)	40 phials
16	Cap Vitamin B-Complex	3000 caps
17	Tab Ciprofloxacin (500 mg)	500 tabs
18	Tab Paracetamol kid (125mg)	1500 tabs
19	Tab Cinnerizine (25mg)	500 tabs
20	Betamethasone oint (0.5 mg)	30 tubes

Contd . to next page

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232**

Memo no:

Date:

Sl.No.	Name of medicines	Quantity
21	Tab Ranitidine (150mg)	7000 tabs
22	Tab Paracetamol(500mg)	5000 tabs
23	Tab Pantaprazole (40 mg)	1000 tabs
24	Diclofenac ointment	100 tubes
25	Tab Amoxicillin+Clavulanic Acid Kid (228.5mg)	600 tabs
26	Vitamin Syrup (100 ml)	300 phials
27	Cough Syrup (100ml)	200 phials
28	Syrup Norfloxacin+ Metronidazole	30 phials
29	Iron + Folic Acid + Vitamin B12 Syrup (200 ml)	100 phials
30	Clotrimazole Oint	70 tubes

Equipments

1	Weighing Machine	1 pc
2	B.P Machine	1 pc


Chairman

Cooper's Camp Notified Area Authority

**Chairman
Coopers Notified Area**



HALL PHARMACEUTICAL DISTRIBUTORS

97/99, SRI ARBINDA ROAD
HOWRAH - 711106
WEST BENGAL, INDIA

Phone & Fax : 2665 - 0860 (Off)
: 2352 - 4203 (Resi), Area code - 033
Mobile : 94331 38757 / 9143291204
E-mail : halphadis@gmail.com

INVOICE

INV.No : 7/14-15

Date: 22.04.2014

To
The Chairman
Coopers Camp Municipality
Dist: Nadia

Dear Sir,

In response to your ^{order.} tender vide Memo :23/CCNAA/ Dt. 17.04.2014
We are Supplying the following medicine.. Our rate are inclusive of delivery charges
and Vat 5% Extra.

Sl.No:	Product's Name	Unit	Quantity	Rate	Amount
1.	Oral Rehydration Salts IP Composition Sodium Chloride IP 2.80 Dextross (Anhydrous) IP 13.50 gm Potassium Chloride I.P. 1.50 gm Sodium Citrate IP 2.90 gm)	1Pkt (21.8 gms)	3000 Pkt	7.80	23400.00
				Vat 5%	1170.00
	VAT No 19721175052			Total	24570.00
	DI No 29SW 14 SBW				

For - Hall Pharmaceutical Distributors.

Borak

Marketing Executive



Passed for payment of
Rs. 24570 = 24 (Rupees twenty
four thousand five hundred
seventy) only

Pay Rs. 24570 = 00
(.....)

[Signature]
Executive Officer
Cooper's Camp Notified
Area Authority

Chairman
Cooper's Camp Notified
Area Authority

Chairman
Cooper's Camp N A A

[Signature]
24/9/14

Received ch NO:- 948748 dt 24.7.14. Rs. 119858/-
₹:- one lac ninety thousand Eight hundred fifty Eight only

HALL PHARMACEUTICAL DISTRIBUTORS

Bansal

Authorised Signatory

30/7/14



HALL PHARMACEUTICAL DISTRIBUTORS

97/99, SRI AROBINDA ROAD
HOWRAH - 711106
WEST BENGAL, INDIA

Phone & Fax : 2665 - 0860 (Off)
: 2352 - 4203 (Resi), Area code - 033
Mobile : 94331 38757 / 9143291204
E-mail : halphadis@gmail.com

CHALLAN

Challan No : 7/14-15

Date: 22.04.2014

To
The Chairman
Coopers Camp Municipality
Dist: Nadia

Dear Sir,

In response to your ^{order} tender vide Memo :23/CCNAA/ Dt. 17.04.2014
We are Supplying the following medicine.. Our rate are inclusive of delivery charges
and Vat 5% Extra.

Sl.No:	Product's Name	Unit	Quantity	Batch no	Exp Dt.
1.	Oral Rehydration Salts IP Composition Sodium Chloride IP 2.80 Dextross (Anhydrous) IP 13.50 gm Pottassium Chloride I.P. 1.50 gm Sodium Citrate IP 2.90 gm)	1Pkt (21.8 gms)	3000 Pkt	9769658	02/16
	VAT No 19721175052				
	DI No 29SW 14 SBW				

For – Hall Pharmaceutical Distributors.

Bansal

Marketing Executive



*The above itcans is received
and entered in stock register*

S.K.
25.04.2014

Multipurpose Helper Cum
S.K. Clerk (CBPIS)
Cooper's Camp Notified
A ex Authority

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232

Memo no: 23/CENAA


Date: 17/04/14

To,
The Hall Pharmaceutical Distributer
97/99, Sri Arabinda Road
Howra-711106
West Bengal.

Sub:- Supply order of the Medicine under CBPHCS

You are hereby ordered to supply urgently the following Medicine towards the Health Center under Coopers Camp Notified Area Authority under CBPHCS Programme within five days from the receipt of the office order letter.

Sl.No.	Name of medicines	Quantity
1	O.R.S	3000 pcs


Chairman
Coopers Camp Notified Area Authority
Chairman
Coopers Notified Area.

OFFICE OF THE CHIEF MEMBERS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Salaries for the Health Officer & M.S.C. Staff for the Month of August, 2014 under CBPLAS

S.No	Name of Employee	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	27240	150	27090	<i>Abhijit Nath</i>
2	Sajal Biswas	S.I	6750	0	6750	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kumar Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>Samaresh Das</i>
6	Balaji Das	Account Assistant	6250	0	6250	<i>Balaji Das</i>
TOTAL			58990	150	58840	

Pass for payment Rs. 58990.00 (Rupees Fifty eight thousand nine hundred ninety) only

Balaji Das

25/08/14

Chairman

Pay Rs. 58840 = 58,840 (Fifty eight thousand eight hundred forty only)

Balaji Das

Chairman

Cooper's Camp N.A.A

25/08/14
Executive Officer
Cooper's Camp Notified Area Authority

Chairman
Cooper's Camp N.A.A
25/08/14

CBPHAS

- ① Rs. 58840 = 58,840
- ② Rs. 35510 = 35,510
- ③ Rs. 2500 = 2,500

96850 = 96,850
by on - 24/8/14
Dr - 25/8/14

**OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA
AUTHORITY**

Honorarium for the Honourary Health Worker for the month of Augst , 2014 under
C.B.P.H.C.S. Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	H H W	2500	2500	Suchitra Biswas
5	Uttara Majumder	H H W	2500	2500	Uttara Majumder.
6	Sabita Bapary	H H W	2500	2500	Sabita Bapary,
7	Kalpana Roy	H H W	2500	2500	Kalpana Roy
8	Aparna Golder	H H W	2500	2500	Aparna Golder
9	Manjuri Biswas	H H W	2500	2500	Manjuri Biswas
10	Jyotsna Das	H H W	2500	2500	Jyotsna Das
11	Shibani Mallick(Roy)	H H W	2500	2500	Shibani Mallick
12	Mana Bapary	H H W	2500	2500	Mana Bapary
13	Purnima Das	H H W	2500	2500	Purnima Das.
14	Mousumi Sikder	H H W	2500	2500	Mousumi Sikder.
	Total		35510	35510	

Pass for payment Rs 35510/- (Rs Thirty five Thousand five hundred ten) only

Balaji Das,

25/08/14

[Signature]

Chairman
Coopers Camp N A A

Pay Rs..... 35510/- (thirty five thousand
hundred Ten only)

[Signature]
Chairman
Cooper's Camp N A A

[Signature]
25/08/14

[Signature]
Executive Officer
Cooper's Camp Notified
Area Authority

[Signature]
25/8/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Honorarium for the Honourary Health Worker for the month of August, 2014 under C.B.P.H.C.S. Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Archana Bigwas	H.H.W	2500	2500	<i>Ar</i> Archana Biswas
TOTAL				2500	

Pass for payment Rs.2500.00 (Rupees two thousand five hundend) only

Ar
Chairman
Coopers Camp N A A

Baleu' Sar.

25/08/14

Pay Rs. 2500 = IN (Two thousand five hundred) only

Ar
Executive Officer
Cooper's Camp Notified
Area Authority

Ar
Chairman
Cooper's Camp N A A

Ar
25/08/14

OFFICE OF THE COUNCILLORS OF
 COOPER'S CAMP NOTIFIED AREA AUTHORITY

e B P H es

① Rs. 2500 = 2500
 ② Rs. 4200 = 4200

 6700 = 6700

Advance to the attendants @ 625.00 per week in the month of August, 2014 under C.B.P.H.C.S. programme.

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Dipali Halder	Attendant	625 x 4 = 2500	2500	Dipali Halder.
TOTAL				2500	

Pass for payment Re. 2500.00 (Rupees two thousand five hundred) only

Balaji Das .

25/08/14

Chairman
 Cooper's Camp NAA

PAY RS. 2500.00 (Two thousand five hundred only)
 Dipali Halder

Executive Officer
 Cooper's Camp Notified
 Area Authority

Chairman
 Cooper's Camp NAA
 25/8/14

25/08/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
Bill**

Bill for Tiffin allowance to health staffs of CBPHCS for the month of August-2014

Sl No	Name	Amount Rs	Signature
1	Sajal Biswas	200	<i>Sajal</i>
2	Sisir Kr Mondal	200	<i>Sisir Kumar Mondal</i>
3	Ashim Das	200	<i>Ashim Das</i>
4	Samaresh Das	200	<i>Samaresh Das</i>
5	Balai Das	200	<i>Balai Das</i>
6	Mita Mukherjee	200	<i>Mita Mukherjee</i>
7	Aditi Chowdhury	200	<i>Aditi Chowdhury</i>
8	Bandhana Roy Saha	200	<i>Bandhana Roy Saha</i>
9	Suchitra Biswas	200	<i>Suchitra Biswas</i>
10	Uttara Majumder	200	<i>Uttara Majumder</i>
11	Sabita Bapary	200	<i>Sabita Bapary</i>
12	Kaipana Roy	200	<i>Kaipana Roy</i>
13	Aparna Golder	200	<i>Aparna Golder</i>
14	Manjuri Biswas	200	<i>Manjuri Biswas</i>
15	Jyotsna Das	200	<i>Jyotsna Das</i>
16	Shibani Mallick(Roy)	200	<i>Shibani Mallick</i>
17	Mana Bapary	200	<i>Mana Bapary</i>
18	Purnima Das	200	<i>Purnima Das</i>
19	Mousumi Sikder	200	<i>Mousumi Sikder</i>
20	Archana Biswas	200	<i>Archana Biswas</i>
21	Dipali Halder	200	<i>Dipali Halder</i>
	Total Rs	4200	

Pass for payment Rs.4200.00 (Rupees Four Thousand Two Hundred) only

[Signature]

Chairman

Cooper's Camp Notified Area Authority

Balai Das.

25/08/14

Pay Rs. 4200.00 (Four Thousand Two Hundred) only

[Signature]

Chairman
Cooper's Camp N A A

Executive Officer
Cooper's Camp Notified
Area Authority

Ar
25/8/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET**

Sub: Provision of allowance for
Mobility Support, etc.

Chairman.

As previously mentioned allowance of Rs 200/- (Rupees two hundred only) may be given to the HHWS (14+1 newly appointed in the month of August, 14), M.S. cell staffs (05 heads) and the temporarily engaged attendant (01 head) for the month of August, 14. The expenditure may be incurred from the CBPHC contingency fund.

Avan
25.08.14.

allowed



Chairman
Cooper's Camp Notified
Area Authority

To
The Chairman
Coopers Camp N.A.A

Voucher no 15.

অশ্রদ্ধা

বিনীত নবেদন যেকোন বর্গীয়া স্বপ্নে
বাঁহীয়া জেলা অঞ্চল ও পরিবার স্বপ্নে
সম্মতি কর্তৃক দেওয়া পাঁচটি জালাবিজ
একসঙ্গে হোলাই চাষ হোলাই হোলাই
সম্প্রদায় হোলাই বহুলাই পাঁচটি
জালাবিজ হোলাই দেওয়া হোলাই
হোলাই ও দাঁড়ি হোলাই 150.00 টকা
(একসঙ্গে হোলাই চাষ) হোলাই হোলাই

আত্মের অশ্রদ্ধা হোলাই হোলাই
হোলাই হোলাই হোলাই 150.00 টকা হোলাই
হোলাই হোলাই হোলাই হোলাই হোলাই
হোলাই হোলাই

Signature
Chairman
Coopers Notified Area

Signature

Signature

paid by me

09/03/14

No. 11967 Shop: 03473-283162 Mo: 9732722007
9434451975

CASH MEMO


JOY MA-KALIKISHAN SERVICE

Dealer: - Indian oil Corporation Ltd.

Lice. No. -04/NDI/H.S.D./M.S.

Vill+P.O. - Nokari (Ranaghat), Dist. - Nadia.

Name/ Vehicles No. WBS 57 B 437
Address WBS 57 B 437

Particulars	Qty. liters	Rate/ liters	Amount	
			Rs.	P.
H.S.D. 	124	8068	100	
		Total-	100	

84884

Voucher no - 16.

TO
The Chairman
C.C.N.A.A

sub: for caroil

Sir,

It is the humble submission of the
under signed that I am Sajal Biswas,
went to Azanghata for submitting immunization
certificate by bike

So you are requested to approve
my expenses ^{of Rs. 100} (bike oil) & oblige me

Dated: 4.07.2014

Your faithfully
Sajal Biswas.

12/8/14.
Chairman
Coopers Notified Area

Paid by me
12/08/14.

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET**

CBPHes
948756

*Executive Officer
CCNAA*

*ely-m
M-28967-00
20/8/14*

An amount of Rs. 28,967=00. *Two* Twenty eight thousand nine hundred and seven only required to meet up the bill payment towards *Binno Enterprise, road no. 12, CWA, Kamastat,* for the purpose of supplying *Sifon Sharee, Blouse (blue coloured), and* *bag etc at health section under CBPHes.*

The above quoted amount may be *incurred* from the head of maintenance charge of health under CBPHes.

X

Kampan N

19/08/2014
Para 'x' above may be approved
has
19/8/14

Di

OFFICE OF THE COUNCILLORS OF COOPERS CAMP NOTIFIED
AREA AUTHORITY

Office order No:- 138/CENAA. 67-04-07-2014.

From :-Chairman,
Coopers Camp Notified Area Authority
To :- ~~XXXX~~ Biswas Enterprise, Ward no.12, CENAA -
Ward no. 18, Coopers Camp Notified Area.

You are hereby ordered to supply the following materials towards C.C.N.A.A. Office at Health section for the use of woman health worker under CBPHCS as smooth running of the Health Centre under Coopers Camp Notified Area Authority. The following materials should be reached in the office within one week from the receive of the office order letter. List of the required materials are given below.

Sl.No	Name of the materials	Quantity
1	Shiffon Sharee blue Coloured	32 Pis
2	Cotton Blouse Blue Colour	32 pis
3	Umbrella	21 Pis
4	Side Bag	16 pis
5	Modem	1 pis
6	Wall Clock	1 pis
7	kit Bag	5 pis

Received a copy

FOR BISWAS ENTERPRISE

Biswas Enterprise

PROCESSED

4/07/14

Be

Chairman,
Coopers Camp Notified Area Authority

Chairman
Cooper's Camp Notified
Area Authority

OFFICE OF THE COUNCILLORS OF COOPERS CAMP NOTIFIED
AREA AUTHORITY

COMPERATIVE STATEMENT OF THE PURCHASING MATERIALS FOR
HEALTH WORKERS IN HEALTH SECTION UNDER CBPHCS.

Sl no.	Name of the Items	quantity	Biswas Enterprise	M/S Gopal Construction	M/S.Maa Tara Construction	Maa Manasha Enterprise
<u>1</u>	Shiffon Sharee(Blue)	32	305/-per pis	310/-per pis	308/- per pis	307/- per pis
<u>2</u>	Cotton Blouse(Blue)	32	151/-per pis	160/- per pis	159/- per pis	158/- per pis
<u>3</u>	Umbrella	21	235/-per pis	240/-per pis	239/- per pis	238/- per pis
<u>4</u>	Side Bag	16	285/-per pis	290/-per pis	289/- per pis	288/- per pis
<u>5</u>	Modem	01	1895/-per pis	1900/-per pis	1895/- per pis	1890/- per pis
<u>6</u>	Wall Clock	01	225/-per pis	230/- per pis	229/- per pis	228/- per pis
<u>7</u>	Kit Bag	05	552/-per pis	556/- per pis	555/- per pis	555/- per pis


Chairman,

Coopers Camp Notified Area Authority

Chairman
Cooper's Camp Notified
Area Authority

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No.

Date 20-07-2014

To,
The chairman
Cooper's camp N.A.A
Cooper's camp Nadia,

BILL

SLNO:-	ITEM	QUANTITY	RATE(Rs)	TOTAL AMOUNT
①	stiffon shanee blue coloured	32 pcs	@RS-305/perpcs	= RS-9760
②	cotton blouse blue coloured	32 pcs	@ RS-151/perpcs	=RS-4832
③	Umbrella	21 pcs	@ RS-235/perpcs	= RS-4935
④	side Bag	16 pcs	@ RS-285/perpcs	=RS-4560
⑤	Modern	1 pcs	@ RS-1895/perpcs	= RS-1895
⑥	wall clock	1 pcs	@ RS-225/perpcs	=RS-225
⑦	Kit Bag	5 pcs	@ RS-552/perpcs	=RS-2760

TOTAL AMOUNT OF RS-28,967

(Twenty-Eight Thousand Nine hundred Sixty-seven only)

BISWAS ENTERPRISE


Debasish Biswas

Proprietor


Passed for Payment Rs. 28,967.00.
(Twenty eight thousand nine hundred sixty seven only)


Executive Officer


Chairman


19/08/14

Pay Rs. 28,967.00 (twenty eight thousand
(nine hundred sixty seven) only)


Chairman
Cooper's Camp N A A

FOR BISWAS ENTERPRISE

Debit to Passbook
PROCESSED 21/08/14

C B P H e)

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

NOTE SHEET

cf m - 948755
R - 4057
DT - 26/8/14

Executive officer
CCNAA.

An amount of Rs. 4057.00 (four thousand and fifty seven) only required to meet up the bill payment towards. Chhabra Bankar Mayunder. for the work of sinking - be sinking of tube well at P.L. Home. at the ward no. 07. under Cooper's Camp Notified Area Authority.

The above quoted amount may be disbursed from the head of Health under CBPHCS.

[Signature]
25/8/14

Chairman pl
→

'X' above may be approved
[Signature]
25/8/14

Bi

No.-

*Sulochan Bishwas
P. A. A. N. A. A.
18/07/14*

CASH MEMO / CHALLAN



9333704120
9333746069

BHABANI TALE & MOBILE CENTRE

Cooper's Camp Notofied Area, Cooper's Bazar,
P.O.- Cooper's Camp, Ranaghat, Nadia. Pin-741232

Prop.- Manindra Majumdar & Sons

Date... 18/07/14

Name: *To the Executive Officer*
Address: *Cooper's Camp. N. A. A.*

SL. NO.	PARTICULARS	QUANTITY.	RATE	AMOUNT
	MDN- 7797288917	352.00	352.00	352.00
	RSN- Be - <u>46</u>		46.-	46
	IMEI-	<i>Sulochan Bishwas Recd Rs 398/-</i>		
		Total		398.00

N.B. :- 1) Goods once Sold cannot be taken back or exchanged. 2) ব্যাটারীর ওয়ারেন্টি ৬ মাস পর্যন্ত।
3) Warranty obligations where as applicable shall be fulfilled by our principal or by authorised Service Centre.

Amount in words: *Three hundred Ninety Eight only*
Signature of Buyers: _____
Signature & Stamp Distributor: *Bhabani Sukernajunder* E. & O. E.

voucher no. 1

No.- 191

CASH MEMO / CHALLAN



9333704120
9333746069

BHABANI TALE & MOBILE CENTRE

Cooper's Camp Notofied Area, Cooper's Bazar,
P.O.- Cooper's Camp, Ranaghat, Nadia. Pin-741232

Prop.- Manindra Majumdar & Sons

Date. 19/08/14

Name To Chairman
Address Cooper's Camp, C.A.A.

SL. NO.	PARTICULARS	QUANTITY.	RATE	AMOUNT
	MDN- 70 290 532 62			120.00
	RSN-			}
	IMEI-			
			Total	120.00

N.B. :- 1) Goods once Sold cannot be taken back or exchanged. 2) ব্যাটারীর ওয়ারেন্টি ৬ মাস পর্যন্ত।
3) Warranty obligations where as applicable shall be fulfilled by our principal or, by authorised Service Centre.

Amount in words One hundred Twenty only

Signature of Buyers

manindra m. j.

E. & O. E.
Bhabani Souker Majumdar
Signature & Stamp Distributor

Phone : 283502 (R)
283598 (O)

BHABANI SANKAR MAJUMDAR

Contractor & General Order Suppliers

Cooper's Camp Notified Area, Ward No.— 5, Plot No.— 48,
P. O.—Cooper's Camp, Dist.—Nadia, Pin—741232

Ref. No.

Date 01-08-14

To
The Chairman,
Coopers Camp N.A.A,
Coopers, Ranbaghat, Nadia.

Sub:- Bill for re-sinking
Tubwell at P.L Hospital,
(Name) at Ward No-07.

1. Re-sinking Pipe - 60' @ Rs = 10/ft = 600.00
2. Sinking Pipe - 78' @ Rs = 13/ft = 1014.00
3. Filter PVC (1 1/2") - 2 Pcs @ Rs = 250/Pcs = 500.00
4. G.I Pipe (1 1/2") = 2 ft @ Rs = 80/ft = 160.00
5. Hitter 1 1/2" = 1 ft @ Rs = 15/ft = 15.00
6. Nipple - 1 1/2" = 1 Pcs @ Rs = 10/Pcs = 10.00
7. Socket 1 1/2" = 1 Pcs @ Rs = 20/Pcs = 20.00
8. Long Socket (1 1/2") = 3 Pcs @ Rs = 40/Pcs = 120.00
9. Cap = 1 Pcs @ Rs = 20/Pcs = 20.00
10. Sand & Tin = 1 Tin @ Rs = 20/Tin = 20.00
11. Cow dung = Rs = 20/- = 20.00
12. Carrying Charge = Rs = 100/- = 100.00
13. Motor Settings (Labor Charge) = Rs = 300/- = 300.00

Amtd. 04/08/14
S.A.E.
Cooper's Camp Notified
Area Authority

Recd. 3149/

Three thousand One hundred
and forty Rupees Only.

Rs = 3149.00

vouch no. 3

Yours faithfully,
Bhabani Sankar Majumdar



To Whom it may Concerned

that the water pump of Coopers
Camp D.M.C. is repairing / running
(of Pump) done satisfactory.

M. T. (Lab)

01.8.14
M. T. (Lab)
Coopers, DMC
Ranaghat, Nadia

To, whom it may concern

The roof (asbestos shade) of
Cooper's P.L. Home ODD has
been repaired satisfactorily.

Paul
01/08/19

Robert Miller
Cooper's P. L. Home
Tonawanda, N.Y.

Phone: 283502 (R)
283598 (O)

BHABANI SANKAR MAJUMDAR

Contractor & General Order Suppliers

Cooper's Camp Notified Area, Ward No.— 5, Plot No.— 48,

P. O.—Cooper's Camp, Dist.—Nadia, Pin—741232

Ref. No.

Date 01.08.2014.

To
The Chairman.

Cooper's Camp N.A.A.

Cooper's Camp, Ramaghat, Nadia.

Subject:-

Bill for P.L

Hospital's Roof Asbestos

Pitchchat & Labour change

1. Pitch chat 15^{sq} @ 16.00 Per/1F. = 240.00 ✓
2. Labour Change = 150.00

Total = 390.00.

(Three hundred Ninety Only)

04/08/14
Cooper's Camp Notified
Area Authority

Received Rs 390/-

voucher no. 4.

Bhabani Sankar Majumdar


From vouchers no. ① - Rs 398.00
From vouchers no. ② - Rs 120.00
From vouchers no. ③ - Rs 3149.00
From vouchers no. ④ - Rs 390.00

Rs 4057.00


4057.00
Passed for Payment Rs. 4057.00
(four thousand and fifty seven only)


Executive Officer



Chairman


25/08/14

Pay Rs. 4057.00 (four thousand
(fifty seven only))


Chairman
Cooper's Camp N A A

Bharati Saker mojunbar


26/8/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Salaries for the Health officer & M.S Cell Staff for the Month of September, 2014 under
CBPHCS

COPIES -
① 5884050
② 3801050

9685050

24/09/14
M - 948750
Ry - 9685050

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	27240	150	27090	<i>[Signature]</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>[Signature]</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>[Signature]</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>[Signature]</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>[Signature]</i>
6	Balai Das	Account Assitant	6250	0	6250	<i>[Signature]</i>
TOTAL			58990	150	58840	

Pass for payment Rs 58990.00(Rupees Fifty eight thousand nine hundred ninety) only

Balaji Das.
20/09/14

**Chairman
Coopers Camp N A A**

**Executive Officer
Cooper's Camp Notified
Area Authority**

**Chairman
Cooper's Camp N A A**

Pay Rs. 5884050 (Rupees Fifty eight thousand nine hundred ninety) only
[Signature]
24/09/14

**OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA
AUTHORITY**

Honorarium for the Honourary Health Worker for the month of September , 2014 under
C.B.P.H.C.S. Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	H H W	2500	2500	Suchitra Biswas
5	Uttara Majumder	H H W	2500	2500	Uttara Majumder
6	Sabita Bapary	H H W	2500	2500	Sabita Bapary
7	Kalpna Roy	H H W	2500	2500	Kalpna Roy
8	Aparna Golder	H H W	2500	2500	Aparna Golder
9	Manjuri Biswas	H H W	2500	2500	Manjuri Biswas
10	Jyotsna Das	H H W	2500	2500	Jyotsna Das
11	Shibani Mallick(Roy)	H H W	2500	2500	Shibani Mallick
12	Mana Bapary	H H W	2500	2500	Mana Bapary
13	Purnima Das	H H W	2500	2500	Purnima Das
14	Mousumi Sikder	H H W	2500	2500	
15	Archana Biawas	H H W	2500	2500	Archana Biswas
	Total		38010	38010	

Pass for payment Rs 38010/- (Rs Thirty Eight Thousand ten) only



Chairman
Coopers Camp N A A

Balaji Das

20/09/14


Executive Officer
Cooper's Camp Notified
Area Authority

24/09/14

Pay Rs. 38010/- (Rs Thirty Eight Thousand ten only)

Chairman
Cooper's Camp N A A
21/9/14

C B P H e s

① 4, 15000 = 0
② 3, 55510 = 0

7 50510 = 0

chg m - 948756

DT - 15/9/14

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
Bill

Ad-hoc puja Bonus for the Accounting year 2013-2014 for the M.S. cell staff Vide Go No.....

-----for the year , under C.B.P.H.C.S.

Sl no	Name of Employees	Designation	Total Emoluments as on 31/03/2014	Bonus Amount payable	Signature
1	Sajal Biswas	S.I.	6750	3000	Biswas.
2	Sisir Kr Mondal	Storekeeper & clerk	6250	3000	Sisir Kumar Mondal
3	Ashim Das	Health Assistant	6250	3000	Ashim Das.
4	Samaresh Das	Computer Assistant	6250	3000	Samaresh Das.
5	Balai Das	Act Assistant	6250	3000	Balai Das.
Total				15000	

Pass for payment Rs.15000.00(Rupees Fiffen Thousand) only

Balai Das.
8/09/14.

Pay Rs. 15000 = 00 Fiffteen thousand
(Amount only)

Chairman
Coopers Camp N A A

Executive Officer
Cooper's Camp Notified
Area Authority

Chairman
Cooper's Camp N A A

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

C B P H C S
 ① 2500 = 2
 ② 4200 = 2

 7000 = 2

Allowance to the attendants @ 625.00 per week in the month of September, 2014 under C.B.P.H.C.S. programme.

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Dipali Halder	Attendant	625 x 4 = 2500	2500	Dipali Halder
TOTAL				2500	

Pass for payment Rs.2500.00 (Rupees Two thousand five hundred) only

Balaji Das.

Chairman
Coopers Camp N A A

29/09/14

[Signature]
29/09/14

Executive Officer
Cooper's Camp Notified
Area Authority

Accountant
Cooper's Camp Notified
Area Authority

Pay Rs. 2500.00 (Rupees two thousand five hundred only)
[Signature]

Chairman
Cooper's Camp N A A
[Signature]
29/09/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
Bill**

Bill for Tiffin allowance to health staffs of CBPHCS for the month of September- 2014

SI No	Name	Amount Rs	Signature
1	Sajal Biswas	200	Sajal Biswas
2	Sisir Kr Mondal	200	Sisir Kumar Mondal
3	Ashim Das	200	Ashim Das
4	Samaresh Das	200	Samaresh Das
5	Balai Das	200	Balai Das
6	Mita Mukherjee	200	Mita Mukherjee
7	Aditi Chowdhury	200	Aditi Chowdhury
8	Bandhana Roy Saha	200	Bandhana Roy (Saha)
9	Suchitra Biswas	200	Suchitra Biswas
10	Uttara Majumder	200	Uttara Majumder
11	Sabita Bapary	200	Sabita Bapary
12	Kalpna Roy	200	Kalpna Roy
13	Aparna Golder	200	Aparna Golder
14	Manjuri Biswas	200	Manjuri Biswas
15	Jyotsna Das	200	Jyotsna Das
16	Shibani Mallick(Roy)	200	Shibani Mallick
17	Mana Bapary	200	mana Bapary
18	Purnima Das	200	Purnima Das
19	Mousumi Sikder	200	Mousumi Sikder
20	Archana Biswas	200	Archana Biswas
21	Dipali Halder	200	Dipali Halder
	Total Rs	4200	

Pass for payment Rs.4200.00 (Rupees Four Thousand Two Hundred) only

[Signature]

Chairman

Cooper's Camp Notified Area Authority

Balai Das

20/09/14

[Signature]
24/09/14

Pay Rs 4200.00 (Rupee four thousand two hundred) only

[Signature]

Chairman

Cooper's Camp N A A

Executive Officer
Cooper's Camp Notified
Area Authority

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET**

Sub: Provision of allowance for
mobility support etc.

Chairman

As previously mentioned allowance
of Rs 200/- (Rupees two hundred only) may be
given to the HHWS (15 heads), MS. cell
Staffs (5 heads) and attendant (1 head) for
mobility support or staff allowance etc. for
the month of Sept, 14. The expenditure
may be incurred from CBPM Contingency
fund.

Amk?
20/09/14


Chairman
Cooper's Camp Notified
Area Authority

Office of the Councillors of Cooper's Camp Notified Area Authority

P.O:- Cooper's Camp, P.S:- Ranaghat, Dist:- Nadia

Memo No:- 159/CCNAA.

Date:- 14-07-2014

From,
The Chairman
Cooper's Camp Notified Area Authority
Cooper's Camp, Ranaghat, Nadia .

To,
The Director
State Urban Development Agency , Health Wing
ILGUS Bhavn, Salt Lake Sector-III , Kolkata-700106

Apptd, May
2 June, 14.



Sub:- Submission of Utilisation Certificate (UC) for the month from April 14 to June 14

Utilisation Certificate (From No.S.R.330 A)

Sl No	Letter No.& Date	Amount (in Rs.)
1	23/6/2014	711360
Total		711360

Certified that out of Rs711360.00 of Grants-in-aid sanctioned during the year 2014-2015 in favour of C.C.N.A.A. Under this Ministry / Department letter no given in the margin and Rs. 774672.00 of unspent balance of the previous year, a sum of Rs.462965.00 has been utilized for the purpose it was sanctioned and balance of Rs.1023067.00 remaining unutilized at the end of the JUNE, 2014 quarter has been carried forward to the A/C of next quarter of FY 2014-15

Certified that I have satisfied myself that the condition on which the Grant-in-aid was sanctioned has been dully fulfilled /are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned...

KIND OF CHECK EXERCISED

1. Books of Accounts
2. Orginal Bill, Receipts & Vouchers.
3. Bank Statement
4. Physical Progress

Signature of Chairman/Vice-Chairman/E.O.
14/7/14.

Signature of Chairman/Vice-Chairman/E.O.
Cooper's Camp Notified Area Authority

Chairman
Coopers Notified Area

Annexure-1

Status of Fund received & SOE submitted Upto the month of April.14 to June,2014


Financial Year	Opening Balance	Fund Received from SUDA on 23/6/2014	Total Fund Available	SOE during the month of April.14 to June,14	Total SOE	Balance
2007-2008	213000	364000	577000		309245	267755
2008-2009	267755	725000	992755	200580	1000166	-7411
2009-2010	-7411	1290000	1282589	76988	1413364	-130775
2010-2011	-130775	1165900	1035125	87070	1194949	-159824
2011-2012	-159824	1576050	1416226	228200	1270731	145495
2012-13	145495	1592240	1737735	284802	1096267	641468
2013-14	641468	1761520	2402988	431792	1628316	774672
2014-2015	774672	711360	1486032	462965	462965	1023067

[Handwritten Signature]

Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority
 Chairman
 Coopers Notified Area

Summery Sheet on SOE of Cooper's Camp Notified Area Authority for the month of April, 2014
to June,2014

Sl.No	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	Nil
1	Equipment	Nil
2	Furniture	Nil
3	Construction: Not applicable for the present)	Nil
	a) Sub-Centre	Nil
	b) OPD cum Metrenity Home	Nil
	c) OPE	Nil
4	LEC & Materials	Nil
5	Renovation Works	Nil
6	Base Line Salary	Nil
7	Family Schedule,training, manual,HMIS formate & HHW kit Bag.	Nil
8	Strengthening of existing Maternity Homes & Despinarsies (Not applicable for the Present)	Nil
	Recurring	
9	Honorarium	106530
10	Salaries(Gross)	172650
11	Rent (for the month of Oct.2013 to March, 2014)	18000
12		
13	Medicine	116487
14	Bonus	
15	Opereting cost (Sundries,Printing, Postage & Telephone,T.A. / D.A.)	49298
	TOTAL	462965


14.07.14
Chairman

Coopers Camp N A A
Chairman
Coopers Notified Area

Voucher Details Statement for the month of April, 2014

Annexure-III(b)

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
16/4/2014 vide cheque no. 938171	Medicine	payment to Florence Vide order No 524/CCNAA Dated 18/2/2014 and 567/CCNAA Dated 18/3/2014.	115487 ✓
21/04/2014 cheque no 938172	Rent	From October 2013 To March 2014 to 3 Sub Centres @ Rs 1000 p.m.	18000 ✓
25/04/2014 vide cheque no. 938173	Honorarium	Honorarium to HHW for the month of APRIL, 2014	35510 ✓
	Salaries	Salaries to MS Cell Staff for the month of APRIL, 2014	57550 ✓
Voucher No 6 to 9	Misc. Expences	Perchase of White Chalk, Van fare, Repair of Iron Chair etc.	548 ✓
Total			223095

Voucher Details Statement for the month of May, 2014

Voucher No. & Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
	Medicine		Nil
	Rent		Nil
28/5/2014 vide cheque no 938175.76	Honorarium	Honorarium to HHW for the month of May, 2014	35510
	Salaries	Salaries to MIS Cell Staff for the month of May, 2014	57550
26/5/2014 vide cheque no 938177	Notice Board, Prescription Pad, Resisters etc.	Payment to Biswas Enterprise vide order No 218/C.C.CN.A.A. Dated 16/8/2013.	34315
30/5/2014 vide cheque no 938178	Attendants Allowance	For May, 2014.	5000
Voucher No- 10 to 12	Misc. Expences	Purchase of A-four Papers, Wall Clock, Repair Almirah	635
Total			133010

Voucher Details Statement for the month of June, 2014

Voucher No. & Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
	Medicine		Nil
	Rent		Nil
26/6/2014 vide cheque no 948741,42	Honorarium	Honorarium to HHW for the month of June, 2014	35510
	Salaries	Salaries to MS Cell Staff for the month of June, 2014	57550
26/6/2014 vide cheque no 948743	Attendants Allowance	For June, 2014.	5000
	Other Expenditure		3800
	Misc. Expenditures		
Total			101860

Phone : 2235-7094



FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 340

Date 21/04/2014

Received with thanks from The Chairman, Coopers Camp
notified Area Authority

the sum of Rupees One lakh sixteen thousand four
hundred eighty-seven only

in full / Part Payment of our Invoice No. _____

Date _____ by Cash/Cheque/DD No. 938171

on _____

Rs. 1,16,487/-

A

* This receipt is valid subject to realisation of



FLORENCE INDIA

For FLORENCE INDIA

Authorized Signatory

FLORENCE INDIA



32, Ezra Street, 6th Floor
R No. 609, Kolkata-700 001
Phone : 033 3986-1542
Tele Fax : 2235-7094
Mobile : 9432141945
E-mail : florenceindia@gmail.com
Web. Site : www.florenceindia.com

To

The Chairman
Coopers Camp Notified Area
Dist - Nadia, W.B. Authority

Date:- 21/04/2014

Respected Sir,

We do hereby authorize Mr. Sanatan Das to collect the payment on behalf of us. His signature is duly attested as under.

Thanking You

Signature of Sanatan Das 21/04/2014
SANATAN DAS

FLORENCE INDIA

Authorized Signatory

ATTESTED

Yours faithfully

FLORENCE INDIA

Authorized Signatory

CBPHCS
Dms

93817/16/14
116487

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

NOTE SHEET

Executive Officer
CCNAA

An amount of Rs. 1,16,487=00. Rs. (one lakh sixteen thousand four hundred and eighty seven) only required to meet up the bill payment towards Florence Indira 32 Ezra Street Room no 609. for the work of supply of the medicine under CBPHCS at the health Centre under Coopers Camp Notified Area Authority.

Rs. 72000=00, Rs. (Seventy two thousand) out of Rs. 1,16,487=00. will be disbursed from the head of CBPHCS (Drug) and Rs. 44,487=00. (forty four thousand four hundred eighty seven) only will be disbursed from the head of CBPHCS Salary, etc. fund. and this amount will be adjusted after availability of the fund as drug (CBPHCS) according to Chairman verbal advice.

Jf
11/11/14

Chairman

from above,

As proposed.

11/4/14

G

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232

Memo no: 567/CCNAA.

Date: 18/02/14

To,
Florence India
Approved Distributors for Gen. Tender(Medicine),
32, Ezra Street,Room No.609
Kolkata-700 001

Sub:- Supply order of the Medicine under CBPHCS

You are hereby ordered to supply urgently the following Medicine towards the Health Center under Coopers Camp Notified Area Authority under CBPHCS Programme within five days from the receipt of the office order letter.

Sl.No.	Name of medicines	Quantity
1	Paracetamol (500 mg)	10000 Pcs
2	Iron Cap (adult)	10000 Pcs



Chairman
Coopers Camp Notified Area Authority
SIBU BAIN
Chairman
Cooper's Camp Notified
Area Authority

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232**

Memo no: 524/CCNAA.

Date: 18/02/2014

To,
Florence India
Approved Distributors for Gen. Tender (Medicine),
32, Ezra Street, Room No.609
Kolkata-700 001

Sub: - Supply order of the Medicine under CBPHCS

Your quotation in the lowest rate has been accepted. You are hereby ordered to supply the following Medicine for use at the Sub-Centers of Coopers Camp Notified Area Authority under CBPHCS within fifteen days from the receipt of the office order letter.

Sl.No.	Name of medicines	Quantity
1	Tab Pantoprazole (40mg)	2000 Pcs
2	Tab Bromhexine Hydrochloride (8mg)	1500 Pcs
3	Tab Ibuprofen (400mg)	2000 Pcs
4	Diclofenac Ointment	100 Tubes
5	Tab Ranitidine (150mg)	10000 Pcs
6	Vitamin-A-Oil	20 Bottles
7	Dispevan (2-cc)	600 Pcs
8	Tab Salbutamol (4mg)	1000 Pcs
9	Tab Glimeperide (2mg)	1000 Pcs
10	Tab Amlodipine (5mg)	3000 Pcs
11	Tab Cefixime (200mg)	3000 Pcs
12	Tab Ciprofloxacin (500mg)	1000 Pcs
13	Cap Doxycycline (100mg)	600 Pcs
14	Cap Fluconazole (150mg)	30 Pcs
15	Clotrimazole Ointment,	50 Tubes
16	Cap Vitamin	6000 Pcs
17	Cap Amoxicillin + Clavulanic Acid (625mg)	1000 Pcs
18	Tab Paracetamol Kid (125mg)	1600 Pcs
19	Tab Cinnerizine (25mg)	1000 Pcs
20	Syrup Norfloxacin + Metrinidazole	30 Phial
21	Cough Syrup (100ml)	300 Phial
22	Vitamin Syrup (100ml)	400 Phial
23	Cotten Roll-(100gin)	50 Rolls
24	Tab Domperidone (10mg)	2000 Pcs
25	Tab Cetirizine (10mg)	1000 Pcs


Chairman

Cooper's Camp Notified Area Authority
Chairman
Coopers Notified Area

Cooper's Camp
(13cls) + 4

ASU
979 5019972

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

F A X NO. -

39851542

SALE CHALLAN : 547

AGENT CODE & NAME :

CHALLAN DATE : 03.03.2014

CUSTOMER NAME & ADDRESS

The Chairman

Coopers Camp Municipality

Ranaghat, Dist. - Nadia

West Bengal

ORDER NO 524 / CCNAA

DATE - 18.02.2014

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG.	EXP.
1	TAB. PANTOPRAZOLE 40MG	BD 13334		2000Tab	5/13	4/15
2	TAB. BROMHEXINE 8MG	BH 1302		1500 Tab	6/13	5/16
3	TAB. IBUPROFEN 400MG	KS 3627		2000Tab	11/13	10/16
4	DICLOFENAC OINTMENT	SR 319		100 Tube	11/13	10/15
5	TAB. RANITIDINE 150MG	O89AG17		10000Tab	12/13	11/15
6	VITAMIN A OIL	VAS 1326		20 Bott	10/13	9/15
7	DISPOVAN SYRINGE 2ML	404025SBI		600 Pcs	1/14	12/18
8	TAB. SALBUTAMOL 4MG	MTSS1302		1000 Tabs	9/13	8/15
9	TAB. GLIMIPRIDE 2MG	AF 3015		1000 Tabs	2/13	1/15
10	TAB. AMLODIPINE 5MG	BD 13657		3000Tab	10/13	9/15
11	TAB. CEFIXIME 200MG	SV 3038		3000Tab	12/13	11/15
12	TAB. CIPROFLOXACIN 500	SO131144		1000 Tabs	12/13	11/16
13	TAB. DOXYCYCLINE 100MG	MT 1377	160Tabs		11/12	10/14
		MT 1381	440 Tabs	600 Tabs	11/12	10/14
14	TAB. FLUCONAZOLE 150MG	BH 3067		30 Tabs	12/13	11/15
15	CLOTTRIMAZOLE OINTMENT	344		50 Tubes	11/13	10/15
16	CAP. VITAMIN	AP 3201		6000Caps	11/13	4/15
17	TAB. AMOXY125+CLAVU500	AP 4025		1000 Tabs	1/14	6/15
18	TAB. PARACETAMOL KID	B 134056	1500 Tabs		6/13	5/15
		D 1354	100 Tabs	1600 Tabs	4/13	3/16
19	SYP. NORFLOX+METRONIDA	ML 13F15		30 Bott	6/13	5/15
20	COUGH SYRUP	TR 3060		300 Bott	11/13	10/15
21	TAB. CINNERIZINE 25MG	BD 13731		1000 Tabs	11/13	10/16
22	VITAMIN SYRUP (V Z N)	Lvz 14260		400 Bott	2/14	6/15

Remarks :

Subject to Kolkata Jurisdiction

For Florence India

Authorised Signatory

FLORENCE INDIA

32 Ezra Street

Room No 509, 6th Floor

Calcutta-700001

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001
 DL. NO. - 5364 SW / 4319 SBW
 VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
 FAX NO. - 39851542

SALE BILL : FI / MUN / 13 - 14 / 547
 BILL DATE : 03.03.2014
 AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS The Chairman Coopers Camp Municipality Ranaghat, Dist. - Nadia West Bengal	ORDER NO 524 / CCNAA DATE - 18.02.2014 CHALLAN 547 DATE - 03.03.2014
--	---

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. PANTOPRAZOLE 40MG	BD 13334	4/15		2000Tab	20.00	10' TAB	4000.00	
2	TAB. BROMHEXINE 8MG	BH 1302	5/16		1500 Tab	2.90	10 TAB	435.00	
3	TAB. IBUPROFEN 400MG	KS 3627	10/16		2000Tab	6.40	10 TAB	1280.00	
4	DICLOFENAC OINTMENT	SR 319	10/15		100 Tube	22.00	30GRM	2200.00	
5	TAB. RANITIDINE 150MG	O89AG17	11/15		10000Tab	5.20	10 TAB	5200.00	
6	VITAMIN A OIL	VAS 1326	9/15		20 Bott	90.00	BOTT	1800.00	
7	DISPOVAN SYRINGE 2ML	404025SBI	12/18		600 Pcs	2.90	PC	1740.00	
8	TAB. SALBUTAMOL 4MG	MTSS1302	8/15		1000 Tabs	2.30	10 TAB	230.00	
9	TAB. GLIMIPRIDE 2MG	AF 3015	1/15		1000 Tabs	15.00	10 TAB	1500.00	
10	TAB. AMLODIPINE 5MG	BD 13657	9/15		3000Tab	5.80	10 TAB	1740.00	
11	TAB. CEFIXIME 200MG	SV 3038	11/15		3000Tab	60.00	10 TAB	18000.00	
12	TAB. CIPROFLOXACIN 500	SO131144	11/16		1000 Tabs	32.00	10 TAB	3200.00	
13	TAB. DOXYCYCLINE 100MG	MT 1377	10/14	160Tabs					
		MT 1381	10/14	440 Tabs	600 Tabs	13.00	10 TAB	780.00	
14	TAB. FLUCONAZOLE 150MG	BH 3067	11/15		30 Tabs	10.00	TAB	300.00	
15	CLOTTRIMAZOLE OINTMENT	344	10/15		50 Tubes	21.00	15GRM	1050.00	
16	CAP. VITAMIN	AP 3201	4/15		6000Caps	10.00	10 TAB	6000.00	
17	TAB. AMOXY125+CLAVU500	AP 4025	6/15		1000 Tabs	26.00	6 TAB	4333.33	
18	TAB. PARACETAMOL KID	B 134056	5/15	1500 Tabs					
		D 1354	3/16	100 Tabs	1600 Tabs	2.95	10 TAB	472.00	
19	SYP. NORFLOX+METRONIDA	ML 13F15	5/15		30 Bott	21.00	30ML	630.00	
20	COUGH SYRUP	TR 3060	10/15		300 Bott	25.80	100ML	7740.00	
21	TAB. CINNERIZINE 25MG	BD 13731	10/16		1000 Tabs	12.00	10 TAB	1200.00	
22	VITAMIN SYRUP (V Z N)	Lvz 14260	6/15		400 Bott	44.80	BOTT	17920.00	
								81750.33	

Remarks :
 Rupees : 81750.33

Subject to Kolkata Jurisdiction

For Florence India
 Authorised Signatory

FLORENCE INDIA
 32 Ezra Street
 Room No 549, 6th Floor
 Calcutta-700001

*Received all the items
 and properly entered
 in the Stock Register*
S.K. 03.14
 Multipurpose Helper Cum
 S.K. Clerk (CBPHS)
 Coopers Camp, Kolkata
 Authority

from voucher no. ①②②

Rs. 1,16,487.00

Passed for Payment Rs. 1,16,487.00


(one lakh sixteen thousand four hundred eighty seven only)



Executive Officer



Chairman


11/04/14

Received cheque in full
Rs 1,16,487/- Dt - 16/04/2014
No - 938171

Pay Rs.
(.....)


Chairman
Cooper's Camp N A A

LUKENS INDL
Sanatan Das
21/04/14
General Secretary

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET

Case No. 9
21/4/14

Executive Officer
C.C.A.A.

An amount of R. 18000/- (Eighteen Thousand) only required to meet up the bill payment towards house rent owner in connection with Sub-centre of health as the rent of the Subcentre at the ward no. 6, ward-no. 12, and also ward-no. 1, under Cooper's Camp Notified Area Authority.

The above quoted amount may be debited from the head of CBPHES and the rent will be given for the months Oct 13 to March 2014.

21/04/14

Chairman

From above

As proposed.

21/4/14

Signature

21

14

୧୨୦

The Chairman
Cooper's Camp N.A.A
Ramaghat, Nadia

୧୩
Date 14.03.2014

ସିଆଲ, ବିନୀତ ମିତ୍ରପତ୍ର ଓ ଚ. ଅନୁକ୍ରମି ଚାକର
କାର୍ଯ୍ୟ, ଯିତରୁ ବିକାଶକର୍ମ ସମ୍ପର୍କିତ କାର୍ଯ୍ୟ
କାର୍ଯ୍ୟ ସମ୍ପର୍କିତ ପ୍ରକାର ୨୨ଟି ଆର୍ଡର କରାଯି
ବାର୍ଷିକ। ଆମର ଚକ୍ରୀ ପ୍ରକାର ଅନୁକ୍ରମି
କାର୍ଯ୍ୟକାରୀ କାର୍ଯ୍ୟକ୍ରମ ଅନୁକ୍ରମି ପ୍ରକାର କାର୍ଯ୍ୟ
ଅନୁକ୍ରମି କାର୍ଯ୍ୟକ୍ରମ ୨୨। ଏହା ଆମର ନିମ୍ନ
ଅନୁକ୍ରମି କାର୍ଯ୍ୟକ୍ରମ। ଏହାମାନ ଓକ୍ଟ ୧୩ ଓକ୍ଟୋବର
ଠାରୁ ଚଳି ଚାଲି ଆସିଛି। Oct-2013 ଓକ୍ଟୋବର-
2014 ପର୍ଯ୍ୟନ୍ତ।

ଅନୁକ୍ରମି
କାର୍ଯ୍ୟ
ନିମ୍ନ
ଅନୁକ୍ରମି
କାର୍ଯ୍ୟ

ଚାହିଁ ସମସ୍ତଙ୍କର ମିଳିତ କାର୍ଯ୍ୟକ୍ରମ
ଅନୁକ୍ରମି କାର୍ଯ୍ୟକ୍ରମ ଚାହିଁ, ଚାହିଁ କାର୍ଯ୍ୟକ୍ରମ
ଚାହିଁ କାର୍ଯ୍ୟକ୍ରମ।

Received 6000

ୱାକ୍ସାକ୍ରମ

ୱାକ୍ସାକ୍ରମ

୧୫/୩/୧୩
for the period
from Oct. 13. to March 14
Rs. 1000/- may be paid.
Rs. 6000/-
27/03/14

Note: A sheddy is required
Vouchers will presently outside the Subcenter
room for the waiting patients.
Mr. Tatan Chakrabarty was told
Chairman
Cooper's Camp Notified
Area / City

The Chairman
Cooper's Camp N.A.A
Ramaghat Nadia

Sunil

অসম্ভাব্য, বিনীত নিবেদন এই যে আশিষী অমী
কুমার দে, সিতা, এ প্রদিকান্ত দে কুমার কাম
প্রবন্ধিত এলাকা এ নুওয়ার্ডে প্রামী বাসীন্দে
আমায় বাড়ীর একটা অংশ কুমার (সীর অ
আজ্ঞাধীন অধীন একটা আর (অন্যত্র হিজা
কবছর করা হয়। আর (অন্যত্রের মাঝ
ইন্দিয়া জাঙ্গী, বর্তমান উক্ত প্রবন্ধিত
কিছু টাকা বাকী আছে Oct-2013
March 2014 পর্যন্ত।

এই অসম্ভাব্য অমী

প্রার্থনা করা হয় আশিষী কুমার, টাকা
মাঠ, তার সুবন্দুগ দান বাধিত করান

Recd. Rs. 6000 (six thousand
only)
Sunil K. Jay

বিনীত
Sunil K. Jay

9/P. Rent for the period
from Oct 13 to March 14
may be paid.

18/3/14
of 13 to March 14
Rs. 1000 x 6 =
Rs. 6000

Recd. no. 3.
27/4/14

Chairman
Cooper's Camp Notified


From voucher no. (1) - Rs. 6000/-
From voucher no. (2) - Rs. 6000/-
From voucher no. (3) - Rs. 6000/-

Rs. 18000/-

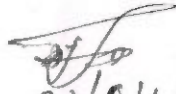
Or. (eighteen thousand) only.

Passed for Payment Rs. 18000/-

(eighteen thousand) only


Executive Officer

Chairman


21/04/14,

Pay Rs. 18000/-
(.....)

Chairman
Cooper's Camp N A A


21/4/14

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Salaries for the Health officer & M.S Cell Staff for the Month of April, 2014 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150 ✓	25650	<i>Abhijit</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kumar Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samareesh Das	Computer Assistant	6250	0	6250	<i>Samareesh Das</i>
6	Balai Das	Account Assistant	6250	0	6250	<i>Balai Das</i>
TOTAL			57550	150	57400 ✓	

Pass for payment Rs.57550.00(Rupees Fifty Seven thousand five hundred fifty) only

Balai Das

Chairman

Coopers Camp N A A

21/4/2014.

Pay Rs.

57400 = ✓

Chairman
Coopers Camp N A A

Dr. 938123
25/4/14

Dr. 929110 = ✓
Dr. 938123
Dr. 25/4/14

Dr. 57400 = ✓

OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA AUTHORITY
Honorarium for the Honourary Health Worker for the month of April, 2014 under C.B.P.H.C.S.
Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	HHW	2500	2500	Suchitra Biswas
5	Uttara Majumder	HHW	2500	2500	Uttara Majumder
6	Sabita Bapary	HHW	2500	2500	Sabita Bapary
7	Kalpana Roy	HHW	2500	2500	Kalpana Roy
8	Aparna Golder	HHW	2500	2500	Aparna Golder
9	Manjuri Biswas	HHW	2500	2500	Manjuri Biswas
10	Jyotsna Das	HHW	2500	2500	Jyotsna Das
11	Shibani Mallick (Roy)	HHW	2500	2500	Shibani Mallick
12	Mana Bapary	HHW	2500	2500	Mana Bapary
13	Purnima Das	HHW	2500	2500	Purnima Das
14	Mousumi Sikder	HHW	2500	2500	Mousumi Sikder
Total			35510	35510	

Pass for payment Rs 35510/- (Rs Thirty five Thousand five hundred ten) only

Balaji Bar.

21/04/14

Chairman
Coopers Camp NAA

Pay Rs. 35510 = 0

Chairman
Coopers Camp NAA

ଶ୍ରୀ ରାମ କୃଷି କର୍ମାଳୟ
ବୁଦ୍ଧାଂଶ ବାଜାର

Vouch - 6.

ନାମ :- Chairman dt- 24-02-2014

ପ୍ରିକ୍ଷାଳୟ :- Cooper's Camp. N.A.A.

₹ ଆଦେଶ 4 Box = 48.00

48.00

Paid by me

Amr.

3.4.14.

ଆଦେଶିତା ଶ୍ରୀକାନ୍ତା

ଶ୍ରୀକାନ୍ତା

To
The Chairman
Coopers Camp. N.A.A

Vouch - 7

dt-

अप्रकार्य

आमंत्रित करण द्वारा कर्मा
संकाश २२६ २२-०९/०८/२०२३
बाकी करण कर्मा वापस करण
श्रीलोक लोकाल नियुक्त याद्वारा
काम - ८०-०० रुका (बनियारण) याद्वारा
माही ०१ प्रकल्प कए बाकी
करिवल

paid by me
from
8-4-19.

बिनबादल
रामन दास

নং ?

ক্যাশ মেমো

তারিখ 10/4/17

মৌ স্টেশনারী

Voucher

প্রোঃ-প্রদীপ দাস (বাপীদা)

সে-৪

কুপার্স টাউন মার্কেট * চনং ওয়ার্ড
রানাঘাট * নদীয়া * M:-9378187139

নাম Chairman

ঠিকানা Cooper's camp N.A.A

পরিমাণ	বিবরণ	দর	টাকা	পং
5	শ্রাজ্ঞ সাদা	9	45	00
1	সাদা কালি	15	15	00
Paid by me 21.04.14.				
		মোট	60	00

স্বাক্ষর রিই দাস

নং - 90 ক্যাশ মেমো / গ্র্যাডভাল রসিদ

বিশ্বকর্মা ইঞ্জিনিয়ারিং সপ

প্রাঃ- শ্রীপতি ঘোষ *Vandana*

কুগার্স বাজার (মনোহারী পল্লি), রাণাঘাট, নদীয়া।

নাম *Chairman*

ঠিকানা *Cooper's Camp. P.O. A.A.*

পরিমাণ	বিবরণ	দর	টাকা	পঃ
১টি	৩.৫০০ gm <i>চন্দ্র</i>		১০০	০০
<i>চন্দ্র</i>	<i>৩৫০০ gm চন্দ্র</i>			
	<i>বিশ্বকর্মা</i>			
	<i>paid by me.</i>			
	<i>১০০০</i>			
	<i>২২/০৪/১৪</i>			
		মোট	৪০০	০০

ক্রেতার স্বাক্ষর

তারিখ - ১১/৭/১৭

বিক্রেতার স্বাক্ষর *Vandana*

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Salaries for the Health officer & M.S Cell Staff for the Month of May, 2014 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150	25650	<i>Arcus</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kumar Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>Samaresh Das</i>
6	Balai Das	Account Assitant	6250	0	6250	<i>Balai Das</i>
TOTAL			57550	150	57400	

Pass for payment Rs.57550.00(Rupees Fifty Seven thousand five hundred fifty) only

Chairman

Coopers Camp N A A

Pay Rs. 57400 = 12

Executive Officer
Cooper's Camp Notified
Area Authority

Balai Das
20/05/14


929100 P
938125
6-20157

Chairman

OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA AUTHORITY
 Honourarium for the Honourary Health Worker for the month of May, 2014 under C.B.P.H.C.S.
 Programme


Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	H H W	2500	2500	
5	Uttara Majumder	H H W	2500	2500	Uttara Majumder
6	Sabita Bapary	H H W	2500	2500	Sabita Bapary
7	Kalpana Roy	H H W	2500	2500	Kalpana Roy
8	Aparna Golder	H H W	2500	2500	Aparna Golder
9	Manjuri Biswas	H H W	2500	2500	Manjuri Biswas
10	Jyotsna Das	H H W	2500	2500	Jyotsna Das
11	Shibani Mallick(Roy)	H H W	2500	2500	Shibani Mallick
12	Mana Bapary	H H W	2500	2500	Mana Bapary
13	Purnima Das	H H W	2500	2500	Purnima Das
14	Mousumi Sikder	H H W	2500	2500	Mousumi Sikder
	Total		35510	35510	

Pass for payment Rs 35510/-(Rs Thirty five Thousand five hundred ten) only



 Chairman
 Coopers Camp N A A

Balaji Das,

20/05/14.


 Executive Officer
 Cooper's Camp Notified
 Area Authority

Pay Rs. 35510/-
 (.....)


 Chairman
 Cooper's Camp N A A

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Allowance to the attendants @ 625.00 per week in the month of May, 2014 under C.B.P.H.C.S. programme.

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Archana Biswas	Attendant	625 x 4 = 2500	2500	Archana Biswas
2	Dipali Halder	Attendant	625 x 4 = 2500	2500	Dipali Halder
TOTAL				5000	

Pass for payment Rs.5000.00(Rupees Five thousand) only

Chairman,
The above mentioned
Two attendants have
worked in the three
Subcentres in the month
of May, 2014.
They may be paid.

Health Officer
Cooper's Camp NAA

[Signature]
30/5/14

[Signature]
30/5/14

Executive Officer
Cooper's Camp Notified
Area Authority

[Signature]
30/5/14

Chairman
Cooper's Camp NAA

[Signature]

Pay Rs. 5000 = 2

Chairman
Cooper's Camp NAA
[Signature]
30/5/14

[Handwritten notes]
938128
30/5/14

নং-

9

ক্যাল মেনো

তারিখ

25/4/14

মৌ স্টেশনারী

প্রাঃ-প্রদীপ দাস (বাগীদা)

Voucher-100

10

কুপার্স টাউন মার্কেট ★ চনং ওয়ার্ড

রানাঘাট ❉ নদীয়া ❉ M :- 9378187139

নাম... Chairman.....

ঠিকানা... Cooper's Camp IV, AA.....

পরিমাণ	বিবরণ	দর	টাকা	পঃ
1	A4 Paper	200	200	00
Paid by me From 7.5.14.				
Two hundred only.				
		মোট	200	00

স্বাক্ষর

D. S. Das

বিশ্বকর্মা স্টীল ফার্ণিচার

প্রস্তুত কারক :- বিশ্বকর্মা ইঞ্জিনিয়ারিং সঙ্গ

প্রো:- গ্রাপজ ঘোষ Voucher-II

কুগার্স বাজার (অনোহারী পল্লি), রাণাঘাট, নদীয়া।

নাম *Chairman*.....

ঠিকানা *Coopery Camp N.A.A.*.....

পরিমাণ	বিবরণ	দর	টাকা	পঃ
	<p>সোপেয়ারি</p> <p>2 P বিলিয়ার্ড</p> <p>হস্তেরী বারদ</p> <p>paid by me</p> <p><i>Jasur</i></p> <p>20-5-14</p>		200	00.
		মোট-	200	00.

বিক্রেতার স্বাক্ষর

তারিখ

বিক্রেতার স্বাক্ষর

নং - A ^{০০৯} Repairing Memo তারিখ..... ২৬-৫-০১৪

৫৭১ মৃত্যুঞ্জয় ঘড়ি ঘর ^{Voucher}

★ এখানে সকল রকম ঘড়ি মেরামত ও বিক্রয় করা হয় ★

কুগার্জ বাজার রাণাঘাট নদীয়া

প্রাঃ—সুনিতী বিদ্যালয়

নাম -- Chaman Coopers -- --

ঠিকানা Sab Santar-3 -- -- C-C-NAA

পরিমাণ	বিবরণ	দাম টাকা	পঃ
১-৫	A Jante ১-৫	২৩৫ ০০	
	১০০০ R. ২০০/- ৩০/৫/১৪	/	/
	১০০০ R. ৩৫/২	/	/
	১৯/৫/১৪		
	মোট-	২৩৫ ০০	
	জমা-	২৩৫ ০০	

বিঃ দ্রঃ—৩ মাসের মধ্যে ঘড়ি ফেরৎ না লইলে কোম্পানী দায়ী
নহে। অয়েলিং-এ এক বৎসর গ্যারান্টি দেওয়া হয়। কিন্তু জল
বা ঘাম ঢুকিলে কোন গ্যারান্টি নাই এবং ইলেকট্রনিক্স-এরও
গ্যারান্টি নাই। মেমো ছাড়া ঘড়ি ডেলিভারী হইবে না।

ডে: তাং ২৬-৫-০১৪ ক্রেঃ স্বাক্ষর  স্বাক্ষর

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

NOTE SHEET

CB 8/14

9. 938177 den 28/5/14

9. 34315=0

Executive office
CONAA

An amount of Rs. 34,315=00.00. (Thirty four thousand three hundred fifteen) only required to meet up the bill payment towards Biswas Enterprises, (Car Contractor & Gen. order Supplier) ward no. 12, CONAA. in connection with supplying notice board, Black Board, etc. work of Electric wiring, supplying HP Kauri net (Cartridge, DDR-1 Ram 400 FSB, 512 MB, Battery (Simos) at The Health Centre under Cooper's Camp Notified Area Authority.

The above mentioned amount may be disbursed from the head of contingency under CRPMS

26/05/14

from above,

As proposed.

26/05/14

Chairman

Bj

OFFICE OF THE COUNCILLORS OF COOPERS CAMP NOTIFIED
AREA AUTHORITY

Office order No:- 218/CCNAA 2-16/08/2013

From :-Chairman,
Coopers Camp Notified Area Authority

To :- Biswas Enterprise,
Ward no.08, Govt.Contractors,
Electric Light & General order Supplier,

You are hereby ordered to supply the following materials towards Health Department for the purpose of smooth running of the Health Deptt. Under Coopers Camp Notified Area Authority. The following materials should be reached in the office within one month from the receive of the office order letter. List of the required materials are given below.

<u>SL.No.</u>	<u>Name of the Items</u>	<u>Quantity</u>
1.	Notice Board (1.5 ft x 1 ft.)	03 pis
2.	Black Board (2.5 ft.x 2 ft)	01 pis
3.	Iron rack (for volt tablizer fitting)	01 pis
4.	Prescription pad (3 x 20)	60 no. pad
5.	Steel scale	04 pis
6.	ANC Check-up Register	03 pis
7.	Immunization Register	03 pis
8.	Attendance Register (no.10)	10 nos
9.	Register (no.12 & No.10)	20 + 17
10.	Calculator	04 pis
11.	Kachi	04 pis
12.	Jhata	03 pis
13.	Duster	10 pis
14.	Gum Bottle	06 pis
15.	Ink Bottle	04 pis
16.	Stamp Pad	04 pis
17.	Towal	06 pis
18.	Pillow Cover	06 pis
19.	Bed-Sheet(3 ft.x 7 ft.)	03 pis

- 20. Wood-pencil,Rubber,Pin.Stapler pin (Small,Big)
- 21. Computer printer Refilling and Ramp repairing
- 22. Cover file 100 pis
- 23. Computer paper 01 Bundle



Chairman.

Coopers Camp Notified Area Authority

Chairman
Cooper's Camp Notified
Area Authority

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

Date 26/04/14

To,
The Chairman
Cooper's Camp NAA
Cooper's Camp NADIA

CHALLAN

- ১) কভার কাইল - ১০০ পিস
- ২) ক্লিপ বোর্ড - ১৬ পিস
- ৩) ডিটেল ফেন - ৪ পিস
- ৪) কাষ্টার ফেন - ২০ পিস
- ৫) ১০ নম্বর খাতা - ১৪ পিস
- ৬) ১২ নম্বর খাতা - ১৭ পিস
- ৭) ওয়াশিং (৩০০ml) - ৬ বোতল
- ৮) ক্যালকুলেটর (বেসিক) - ৪ পিস
- ৯) চাকলা - ১৫ পিস
- ১০) কাঁচি - ৪ পিস
- ১১) হ্যান্ড স্মার্ট - ৪ পিস
- ১২) দরজার পর্দা - ৬ পিস
- ১৩) তোয়ালে - ৬ পিস
- ১৪) কালেক্টর - ৬ পিস
- ১৫) পর্দা - কোলালোর - ৬ পিস
- ১৬) গার্ডার পেন - ১ পিস
- ১৭) কালি - ২ বোতল
- ১৮) হাজিরা খাতা - ৪ পিস
- ১৯) প্রেসক্রিপশন প্যাড - ১৫০০০ পিস
- ২০) একক কভার - ৩ পিস
- ২১) মালমাট - ৪ পিস

Received by me and entered in stock
Registered

26/04/14
Multipurpose Helper Cum
S.K. Clerk (CBPHS)
Cooper's Camp Authority

For BISWAS ENTERPRISE

Debasis Biswas

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

Date 29/04/14

To,
The chairman
Cooper's Camp N.A.A
Cooper's Camp Nadia,

আহ্বান
আমার বিনতি নিবেদন এই যে আমি আপনার আর্ডার অনুযায়ী
আর্ডার নং- 218/CCNAA কুমার কার্গিল লোডিকায়েটে প্রিন্সিপাল
অফিস 'স্বাস্থ্য' বিভাগে নিম্নে বর্ণিত দ্রব্যাদি সরবরাহ করেছি
সহকারী তাহার বিন অক্ষয়ী প্র সাইটে সাহায্যে তাহার সুব্যবস্থা করিয়া
বাহিরে করিবেন।

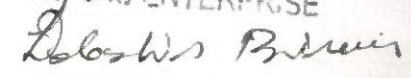
- সরবরাহকৃত দ্রব্যের নাম
- কড়ার অগাইল
 - সিগারেট
 - ডিল স্ট্রোল
 - কাটর স্ট্রোল
 - 10 নম্বর পাতা
 - 12 নম্বর পাতা
 - ওঁচি (কুমার)
 - কালকুমের (ORPAT)
 - চায়ের
 - কাচ
 - শাট ওয়াশ
 - 1) দাড়ার পাতা
 - 2) সোমালি
 - 3) বাসিন্দার কড়ার
 - 4) পাতা কোলালোর স্ট্রোল
 - 5) সারকার পেন
 - কালি
 - 6) 2 অর্ডার পাতা
 - 7) প্রেসার সিমেন কড়ি
 - 8) স্ট্রোল কড়ার
 - 9) স্ট্রোল স্ট্রোল

পরিমাণ	দর	(মোট)
100-পিস @	RS-18/পারপিস =	1800.00
16-পিস @	RS-20/পারপিস =	320.00
4-পিস @	RS-40/পারপিস =	160.00
20-পিস @	RS-15/পারপিস =	300.00
18-পিস @	RS-140/পারপিস =	2520.00
17-পিস @	RS-150/পারপিস =	2550.00
6-পিস @	RS-50/পারপিস =	300.00
4-পিস @	RS-300/পারপিস =	1200.00
4-পিস @	RS-15/পারপিস =	225.00
4-পিস @	RS-30/পারপিস =	120.00
6-পিস @	RS-50/পারপিস =	300.00
6-পিস @	RS-225/পারপিস =	3000.00
6-পিস @	RS-60/পারপিস =	1350.00
1-পিস @	RS-25/পারপিস =	360.00
2-পিস @	RS-50/পারপিস =	150.00
4-পিস @	RS-60/পারপিস =	50.00
15000-পিস @	RS-50/পারপিস =	120.00
3-পিস @	RS-380/পারপিস =	200.00
4-পিস @	RS-300/পারপিস =	15750.00
	RS-30/পারপিস =	900.00
		120.00
মোট =		21765.00

মোট অর্ডার = 21765.00 টাকা
(সকল অর্ডার সাইটের প্রিন্সিপাল
সহকারী)

Voucher no. 1


Chairman
Cooper's Camp Notified
Area Authority

FOR BISWAS ENTERPRISE


BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

Date 26/04/14

To,
The chairman
Cooper's camp N.A.A
Cooper's camp Nadia

CHALLAN

ইলেকট্রিক সামগ্রি
) তারিখ (তারিখ তারিখ)

Received by me and entered in
stock register

for BISWAS ENTERPRISE

Debasish Prasad
Contractor

21

26.04.14

Multipurpose Helper Cum
S.K. Clerk (CBPHS)
Cooper's Camp Notified
Area Authority

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

Date 29/04/14

To,
The chairman
Cooper's camp N.A.A
Cooper's camp Nadia,

সহকারী

আমার বিলিতি নিম্নোক্ত এই যে আমি আমার অর্ডার অনুযায়ী
অর্ডার নং - 218/CCNAA ক্রমসূচী কাঙ্ক্ষিত (নালিকায়েড পরিমাণ -
অতিরিক্ত অধীন (স্বাক্ষর) বিজ্ঞপ্তি) ইলেকট্রিক ওয়ারিং এবং
আর্চ (আমার তার দিগ্নি) করছি। যাতে আমার বিন অস্বাভাবিক
সাইটে গারি আমার সুব্যবস্থা করিয়া সার্বিক করিবেন।

- ① ইলেকট্রিক ওয়ারিং - Rs-3500/-
- ② আর্চ (আমার তার দিগ্নি) - Rs-2200/-

মোট অর্থ = 5700.00 টাকা
(পাঁচশত্কার আশীষত টাকা মাত্র)

For BISWAS ENTERPRISE

J. Biswas

Proprietor



Chairman
Cooper's Camp Notified
Area Authority

Voucher no. 2.

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

Date 26/04/14

To,
The Chairman
Cooper's camp N.A.A
Cooper's camp Nadia,

CHALLAN

- ① লাচিকা বোর্ড - ৩ পিস
- ② লাক বোর্ড - ১ পিস
- ③ ডেপু বিলাইজার বাথার বাক - ১ পিস

Received document entered in Stock Register

26/04/14

Multipurpose Helper Cum
S.K. Clerk (CBPHS)
Cooper's Camp Notified
Area Authority

FOR BISWAS ENTERPRISE
Rabindra Paul
Director

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Cooper's Notified Area, Word No.-12, P.O.-Cooper's Camp, Ranaghat, Nadia.
Pin-741232, W.B.

Ref. No. 218/CCNAA

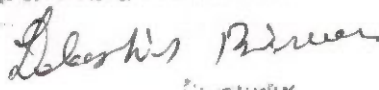
Date 29/04/14

To,
The Chairman
Cooper's Camp N.A.A
Cooper's Camp Nadia,
অসহায়

আহার-বিনোদ নিবেদন এই ক্ষেত্রে আমি তাপসার অর্ডার অনুযায়ী
অর্ডার নং-218/CCNAA কুপার্স কাম্প - লোডিকা (মোট) অর্ডার
আবস্থাটির অধীন 'প্রাক' - বিভাগে কিছু প্রয়োজনীয় দ্রব্য
আবস্থা করছিলাম যাতে অহার বিনোদন অর্ডার
পারি অর্ডার সুকরত্ব করা যায়।

আবস্থা ক্রমিক ক্রমিক	পরিমাণ	দর	মোট
১) লোডিকা মোট	৩ মিটা	@ RS-1000/মিটা	3000.00
২) লোক মোট	১ মিটা	@ RS-600/মিটা	600.00
৩) ডেইরি লাইসেন্স বাধ্যতাক	১ মিটা	@ RS-800/মিটা	800.00
			<u>মোট = 4400.00 টকা</u>
			(আবস্থা করা হয়েছে)


Chairman
Cooper's Camp Notified
Area Authority

For BISWAS ENTERPRISE

Director

Voucher no. 3.

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Mobile- 9832732030

Cooper's Notified Area, Ward No.-12,
P.O.-Cooper's Camp, Ranaghat, Nadia,
Pin.-741232 (W.B.).

Ref. No.....

Date.....

Charab

TO
The Chairman,
Cooper's camp T.N.A.A.

- | | | |
|--|---|-------|
| ① DDR 1 Ram 400FSB
512 MB | 2 | Page. |
| ② Hp Laser Jet cartage
(Reffil + Dranchige) | 1 | Page. |
| ③ Pendine sandisk 16 mb | 1 | Page. |
| ④ Battery (simos) | 1 | Page. |
| ⑤ Reperaroring
Computers. | | |

For BISWAS ENTERPRISE

Subash Prasad
Proprietor

BISWAS ENTERPRISE

Govt. Contractor & General Order Suppliers.

Mobile- 9832732030

Cooper's Notified Area, Ward No.-12,
P.O.-Cooper's Camp, Ranaghat, Nadia,
Pin.-741232 (W.B.).

Ref. No.....

Date.....


To
The chairman
Cooper's camp N.O. A.A.

Bill

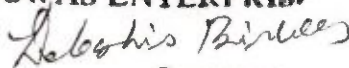
S.No	Description	Qty	Rate	Amount
1	DDR1 Ram 400 FSB 512 MB	2	500.00	1000.00
2	Hp Lager set cartage (Reffel + Dranchages.)	1	500.00	500.00
3	Pendrive (Sandisk) 16 GB	1	700.00	700.00
4	Battery (SIMOS)	1	30.00	30.00
5	Service charges			220.00
Total				2450.00
Adv				
GR. Total				2450.00

Two thousand four hundred fifty only

Recd
26.09.14


Chairman
Cooper's Camp Notified
Area Authority

For BISWAS ENTERPRISE


Proprietor

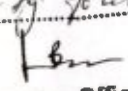

Voucher no. 04,


2120


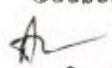
From vouchers no. (i) to (iv).

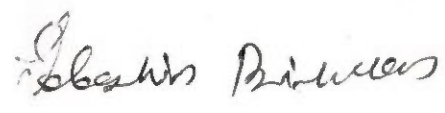
From vouchers no. (i) — Cr. 21765 = 00.
voucher no. (ii) — Cr. 5700 = 00.
voucher no. (iii) — Cr. 4400 = 00.
voucher no. (iv) — Cr. 2450 = 00.

Rs. 34315 = 00

Passed for Payment Rs. 34,315 = 00.
Thirty four thousand three hundred fifteen only

Executive Officer 
Chairman


26/05/14

Pay Rs. 34315 = 00
(.....)

Chairman
Cooper's Camp N A A

28/5/14


29/05/14

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Salaries for the Health officer & M.S Cell Staff for the Month of June, 2014 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150	25650	<i>[Signature]</i>
2	Sajal Biswas	S.I. Storekeeper & clerk	6750	0	6750	<i>[Signature]</i>
3	Sisir Kr Mondal	Health Assistant	6250	0	6250	<i>Sisir Kumar Mondal</i>
4	Ashim Das	Computer Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Account Assitant	6250	0	6250	<i>Samaresh Das</i>
6	Balai Das		6250	0	6250	<i>Balai Das</i>
TOTAL			57550	150	57400	

Pass for payment Rs. 57550.00 (Rupees Fifty Seven thousand five hundred fifty) only

(B) 17
① R. 57400 = D
② R. 35510 = D

17. 929,022 D
9. 9489114
4. 261814
92910

Balai Das
24/6/14

Balai Das
Executive Officer
Cooper's Camp Notified
Area Authority
24/6/14

Chairman
Coopers Camp NAA
Pay Rs. 57400 = D

Chairman
Cooper's Camp NAA
24/6/14

**OFFICE OF THE COUNSELLORS OF COOPER'S CAMP NOTIFIED AREA
AUTHORITY**

Honorarium for the Honourary Health Worker for the month of June, 2014 under
C.B.P.H.C.S. Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	H H W	2500	2500	Suchitra Biswas
5	Uttara Majumder	H H W	2500	2500	Uttara Majumder
6	Sabita Bapary	H H W	2500	2500	Sabita Bapary
7	Kalpana Roy	H H W	2500	2500	Kalpna Roy
8	Aparna Golder	H H W	2500	2500	Aparna Golder
9	Manjuri Biswas	H H W	2500	2500	Manjuri Biswas
10	Jyotsna Das	H H W	2500	2500	Jyotsna Das
11	Shibani Mallick (Roy)	H H W	2500	2500	Shibani Mallick
12	Mana Bapary	H H W	2500	2500	mana Bapary
13	Purnima Das	H H W	2500	2500	Purnima Das
14	Mousumi Sikder	H H W	2500	2500	Mousumi Sikder
	Total		35510	35510	

Pass for payment Rs 35510/- (Rs Thirty five Thousand five hundred ten) only

Baloi Das

24/6/14

[Signature]
Executive Officer
Cooper's Camp Notified
Area Authority

[Signature]
Chairman
Cooper's Camp N A A

Pay Rs. 35510/-
.....
(.....)

[Signature]
Chairman
Cooper's Camp N A A
24/6/14

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Allowance to the attendants @ 625.00 per week in the month of June, 2014 under C.B.P.H.C.S. programme.

Sl no	Name	Designation	Gross Pay	Net Pay	Signature	
1	Archana Biswas	Attendant	625 x 4 = 2500	2500	Archana Biswas	
2	Dipali Halder	Attendant	625 x 4 = 2500	2500	Dipali Halder	
TOTAL					5000	

Pass for payment Rs.5000.00(Rupees Five thousand) only

Chairman
Coopers Camp N A A

Above two
Handants have
order in the
wee subscribers.
in the month
July, 2014.
may may be paid.

Balaji Das
24/6/14.

2014/06/24
G Allowance of 5000 = 2 (Archana Biswas)
B Tabin allowance 3800 = 0

4. 8800 = 10
9 948273
24/6/14
9 8800 = 10

Executive Officer
Cooper's Camp Notified
Area Authority
24/6/14

pay Rs. 5000 = 0
Chairman
Cooper's Camp N A A
24/6/14

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET**

Chairman

Sub: Provision of Tiffin Allowance
to HHWS and MS cell staffs

Owing to huge increase in the price of essential commodities, an allowance of Rupees Two thousand only (Rs 2000) may be given to every month to the HHWS (15 heads) and MS cell staffs (15 heads) for Tea and Tiffin. The expenditure may be incurred from the contingency of the CBPA Fund and effected from the next month, June 2014.

A. S. S.
30.05.14

allowed
S. S.
Chairman
Coopers Notified Area

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date : <i>29/CENRA dt. 22/4/14.</i>
Period of Expenditure : <i>Jan'14.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	<i>35510.00</i>	<i>35510.00</i>
10	Salaries	<i>57550.00</i>	<i>57550.00</i>
11	Rent		
12	Training		
13	Drug	<i>149758.00</i>	<i>269757.00</i>
14	I.E.C		
15	Operating Cost	<i>2000.00</i>	<i>2000.00</i>
Total:		<i>244818.00</i>	<i>364817.00</i>

Gross exp. in drug head should be booked.

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Feb^o14.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Maternity Homes & Dispensaries		
<u>Recurring</u>			
9	Honorarium	<i>35510.00</i>	<i>35510.00</i>
10	Salaries	<i>57550.00</i>	<i>57550.00</i>
11	Rent		
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost		
Total:		<i>93060.00</i>	<i>93060.00</i>

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : *Coopers Campy*

Memo No. & Date :

Period of Expenditure : *Mar²14*

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	<i>35510.00</i>	<i>35510.00</i>
10	Salaries	<i>57550.00</i>	<i>57550.00</i>
11	Rent		
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost	<i>854.00</i>	<i>854.00</i>
Total:		<i>93914.00</i>	<i>93914.00</i>

Office of the Councillors of Cooper's Camp Notified Area Authority

P.O:- Cooper's Camp, P.S:- Ranaghat, Dist:- Nadia

Memo No.

29/CCNAA

Date:-

22/04/2014

From,
The Chairman
Cooper's Camp Notified Area Authority
Cooper's Camp, Ranaghat, Nadia .



Fo.
24.4.14.

To,
The Director
State Urban Development Agency , Health Wing
ILGUS Bhavn, Salt Lake Sector-III , Kolkata-700106

Sub:- Submission of Utilisation Certificate (UC) for the month from Jan 14to March14

Utilisation Certificate (From No.S.R.330 A)

Sl No	Letter No.& Date	Amount (in Rs.)
1	28.5.2013	355680
2	17.6.2013	72000
3	16.8.2013	355680
4	16.9.2013	72000
5	26.11.2013	406480
6	19.12.13	72000
7	27.2.14	355680
8	6.3.2014	72000
Total		1761520

Certified that out of Rs1761520.00 of Grants-in-aid sanctioned during the year 2013-2014 in favour of C.C.N.A.A. Under this Ministry / Department letter no given in the margin and Rs. 641468.00 of unspent balance of the previous year, a sum of Rs.1628316.00 has been utilized for the purpose it was sanctioned and balance of Rs.774672.00 remaining unutilized at the end of the MARCH, 2014 quarter has been carried forward to the A/C of next quarter of FY 2014-15

Certified that I have satisfied myself that the condition on which the Grant-in-aid was sanctioned has been dully fulfilled /are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned...

KIND OF CHECK EXERCISED

1. Books of Accounts
2. Orginal Bill, Receipts & Vouchers.
3. Bank Statement
4. Physical Progress

Signature of Chairman/Vice-Chairman/E.O.
Cooper's Camp Notified Area Authority

SIBU BANERJEE
Chairman
Cooper's Camp Notified
Area Authority

Status of Fund received & SO

Financial Year	Opening Balance	Fund Received from SUDA(on 28.05.13)
2007-2008	213000	364000
2008-2009	267755	725000
2009-2010	-7411	1290000
2010-2011	-130775	1165900
2011-2012	-159824	1576050
2012-13	145495	1592240
2013-14	641468	1761520

Chairman
 Coastal Camp Nollies
 199 Authority

Summary Sheet on SOE of Cooper's Camp Notified Area Authority for the month of January, 2014
to March, 2014

Sl.No	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	Nil
1	Equipment	Nil
2	Furniture	Nil
3	Construction: Not applicable for the present)	Nil
	a) Sub-Centre	Nil
	b) OPD cum Metrenity Home	Nil
	c) OPE	Nil
4	LEC & Materials	Nil
5	Renovation Works	Nil
6	Base Line Salary	Nil
7	Family Schedule, training, manual, HMIS formate & HHW kit Bag.	Nil
8	Strengthening of existing Maternity Homes & Despinsaries (Not applicable for the Present)	Nil
	Recurring	
9	Honorarium	106530
10	Salaries(Gross)	172650
11	Rent	
12	Contingency	
13	Medicine	149758
14	Bonus	
15	Opening cost (Sundries, Printing, Postage & Telephone, T.A. / D.A.)	2854
	TOTAL	431792



Chairman

Coopers Camp N A A

SIBU BAIN

Chairman


Cooper's Camp Notified
Area Authority

Annexure-III(b)

Voucher Details Statement for the month of January, 2014


Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
15/01/2014	Medicine	Part payment to Florence Vide order No 268/CCNAA Dated 21-09-2013	24940
2/1/2014	Medicine	Part payment to Florence Vide order No 377/CCNAA Dated 10/12/2013	75000
15/01/2014	Medicine	Part payment to Florence Vide order No 377/CCNAA Dated 10/12/2013	49818
24/01/2014	Honorarium	Honorarium to HHW for the month of January, 2014	35510
24/01/2014	Salaries	Salaries to MS Cell Staff for the month of January, 2014	57550
	Opereting Expences	purchase of Stationary Goods, Ricksaw van fare, Repair of Fans etc. During the period from 30/07/2012-02/09/2013 . (Vouchers enclosed)	2000
Total			244818

144940/-
124817/-


SIBU BA...
Chairman
Cooper's Camp Notified
Area Authority


Voucher Details Statement for the month of February, 2014

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		nil
	Furniture		nil
	Training		nil
	Medicine		nil
	Medicine		nil
	Medicine		nil
25/02/2014	Honorarium	Honorarium to HHW for the month of February, 2014	35510
25/02/2014	Salaries	Salaries to MS Cell Staff for the month of February, 2014	57550
	Opereting Expences		nil
Total			93060


SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

Voucher Details Statement for the month of March, 2014

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
	Medicine		Nil
	Medicine		Nil
	Medicine		Nil
28/03/2014	Honorarium	Honorarium to HHW for the month of March, 2014	35510
28/03/2014	Salaries	Salaries to MS Cell Staff for the month of March, 2014	57550
Voucher No.1 to 5 (24-12-13 to 06-02-14)	Other Expences	Purchase of RimKhata,Whitener,Pens,Stamps,Antitermite, Stampad etc.	854
Total			93914


SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Salaries for the Health officer & M.S Cell Staff for the Month of January, 2018 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150	25650	<i>Abhijit Nath</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kumar Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>Samaresh Das</i>
6	Balai Das	Account Assitant	6250	0	6250	<i>Balai Das</i>
TOTAL			57550	150	57400	

Pass for payment Rs.57550.00(Rupees Fifty Seven thousand five hundred fifty) only

Balai Das
Chairman

Coopers Camp N A A

Balai Das
20/01/14

Pay Rs.

57400/-

Balai Das

Chairman
Cooper's Camp N A A

20/01/14

① 57400/-
② 355100/-
57400/-

407300/-
929100/-

OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA AUTHORITY
 Honorarium for the Honourary Health Worker for the month of January, 2014 under C.B.P.H.C.S.
 Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy, Saha
4	Suchitra Biswas	H H W	2500	2500	Suchitra Biswas
5	Uttara Majumder	H H W	2500	2500	Uttara Majumder
6	Sabita Bapary	H H W	2500	2500	Sabita Bapary
7	Kalpana Roy	H H W	2500	2500	Kalpana Roy
8	Aparna Golder	H H W	2500	2500	Aparna Golder
9	Manjuri Biswas	H H W	2500	2500	Manjuri Biswas
10	Jyotsna Das	H H W	2500	2500	Jyotsna Das
11	Shibani Mallick (Roy)	H H W	2500	2500	Shibani Mallick
12	Mana Bapary	H H W	2500	2500	Mana Bapary
13	Purnima Das	H H W	2500	2500	Purnima Das
14	Mousumi Sikder	H H W	2500	2500	Mousumi Sikder
Total			35510	35510	

Pass for payment Rs 35510/- (Rs Thirty five Thousand five hundred ten) only

Balaji Das

Chairman

Coopers Camp N A A

Pay Rs. 35510 = 00

CHAIRMAN

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY**

Salaries for the Health officer & M.S Cell Staff for the Month of February, 2014 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150	25650	<i>Abhijit Nath</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kr Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>Samaresh Das</i>
6	Balaji Das	Account Assitant	6250	0	6250	<i>Balaji Das</i>
TOTAL			57550	150	57400	

Pass for payment Rs.57550.00(Rupees Fifty Seven thousand five hundred fifty) only

AK
25/02/14

AK

Balaji Das

**Chairman
Coopers Camp N A A**

21/02/14

Pay Rs. 57400 = ₹
(.....)

AK

**Chairman
Coopers Camp N A A**
AK
25/2/14

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Salaries for the Health officer & M.S Cell Staff for the Month of March, 2014 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	25800	150	25650	<i>Abhijit Nath</i>
2	Sajal Biswas	S.I.	6750	0	6750	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	0	6250	<i>Sisir Kr Mondal</i>
4	Ashim Das	Health Assistant	6250	0	6250	<i>Ashim Das</i>
5	Samaresh Das	Computer Assistant	6250	0	6250	<i>Samaresh Das</i>
6	Balai Das	Account Assistant	6250	0	6250	<i>Balai Das</i>
TOTAL			57550	150	57400	

Pass for payment Rs. 57550.00 (Rupees Fifty Seven thousand five hundred fifty) only

B. S.
Chairman

Coopers Camp N A A

Pay Rs. 57400 = 2

B. S.

Chairman
Coopers Camp N A A

Balai Das

24/03/14

CA P 144
928169
28931
920

OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA AUTHORITY
 Honourarium for the Honourary Health Worker for the month of March, 2014 under C.B.P.H.C.S.
 Programme

Sl no	Name	Designation	Gross Pay	Net Pay	Signature
1	Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
2	Aditi Chowdhury	F T S	2670	2670	Aditi Chowdhury
3	Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
4	Suchitra Biswas	HHW	2500	2500	
5	Uttara Majumder	HHW	2500	2500	Uttara Majumder
6	Sabita Bapary	HHW	2500	2500	Sabita Bapary
7	Kalpana Roy	HHW	2500	2500	Kalpana Roy
8	Aparna Golder	HHW	2500	2500	Aparna Golder
9	Manjuri Biswas	HHW	2500	2500	Manjuri Biswas
10	Jyotsna Das	HHW	2500	2500	Jyotsna Das
11	Shibani Mallick (Roy)	HHW	2500	2500	
12	Mana Bapary	HHW	2500	2500	Mana Bapary
13	Purnima Das	HHW	2500	2500	Purnima Das
14	Mousumi Sikder	HHW	2500	2500	Mousumi Sikder
Total			35510	35510	

Pass for payment Rs 35510/- (Rs Thirty five Thousand five hundred ten) only

Balaji Das.

[Signature]

Chairman
Coopers Camp N A A

24/03/14

Pay Rs 35510 = ✓

[Signature]

Chairman
Coopers Camp N A A



Phone : 2235-7094

FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 483

Date 17/01/2014

Received with thanks from the chairman
cooper's camp Notifide Auth.

the sum of Rupees Twenty four thousand nine
hundred forty only

in full / Part Payment of our Invoice No. _____

Date _____ by Cash/Cheque/DD No. 938162

on _____

Rs. 24,940/-

* This receipt is valid subject to realisation of



FLORENCE INDIA

For FLORENCE INDIA

FLORENCE INDIA



32, Ezra Street, 6th Floor
R No. 609, Kolkata-700 001
Phone : 033 3985-1542
Tele Fax : 2235-7094
Mobile : 9432141945
E-mail : florenceindia@gmail.com
Web. Site : www.florenceindia.com

To
The chairman
Cooper's Camp Notifide Auth.
Ramghat.

Date:- 17/01/2014

Respected Sir,


We do hereby authorize Mr. Swijya Dolui to collect
the payment on behalf of us. His signature is duly attested as under.

Thanking You

Swijya Dolui

Signature of

FLORENCE INDIA


Authorized Signatory

ATTESTED

Yours faithful
FLORENCE INDIA


Authorized Signatory

Final Payment

7. 93815-
157114
24940=

CR 8 461
Part Payment

OFFICE OF THE COUNCILLORS OF
● COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET

7. 92732
39913

Executive Officer
CCNAA

An amount of Rs. 144939=90, as 144940=00;
Rs. (one lakh forty four thousand nine hundred and
forty) only required to meet up the bill payment
towards Florence India, 32 Extra Street, Kol-01,
as supplied medicine towards health centre
vide memo. 268/CCNAA. D. 21-09-2013, under
Cooper's Camp Notified Area Authority.

The above quoted amount may be
disbursed from the head of CBPHCS.

[Signature]
30/09/2013.

~~Chapra~~

As proposed.

15/09/13.

32

Executive Officer
CCNAA

An amount of Rs. 24940=00 (24,940=00 twenty
four thousand nine hundred forty) required out of
Rs. 24,940) as final payment towards Florence
India, 32 Extra Street, Kol-01, in connection
with purchasing medicine for the purpose of
medical treatment of the poor people in the
area under Cooper's Camp Notified Area Authority.
The above quoted amount may be disbursed from
the head of CBPHCS fund.

[Signature]
15/01/14.

Chapra

From above,

As proposed.

15/1/14

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001
DL NO. - 5364 SW / 4319 SBW
VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
F A X NO. - 39851542

SALE BILL : FI / MUN / 13 - 14 / 253 AGENT CODE & NAME :
BILL DATE : 25.09.2013

CUSTOMER NAME & ADDRESS The Chairman Coopers Camp Municipality Ranaghat, Dist. - Nadia West Bengal	ORDER NO 268 / CCNAA DATE - 21.09.2013 CHALLAN 253 DATE - 25.09.2013
---	--

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. DOMPERIDONE 10MG	BD 13474	7/15		3000Tabs	52.00	100'S	1560.00	
2	TAB. IRON + FOLIC (Large)	HGCF 181	6/15		10000Tab	18.00	10'S	18000.00	
3	ORAL REHYDRATION SALT	9764350	4/15	1200 Sach					
		9764352	4/15	600 Sach					
		9764381	4/15	200 Sach	2000Sach	5.20	SACHET	10400.00	
4	TAB. IBUPROFEN 400MG	T 121015	9/15		3000Tabs	64.00	100'S	1920.00	
5	POVIDONE IODINE OINT	279	7/15		100 Tube	15.90	TUBE	1590.00	
6	TAB. RANITIDINE 150MG	TGL 13345	2/15		10000Tab	5.20	10'S	5200.00	
7	TAB. PARACETAMOL 500MG	TGR 13705	5/16		7000Tabs	7.90	10'S	5530.00	
8	TAB. METRONIDAZOLE 400	TM 83169	6/17	1575 Tabs					
		TM 83119	5/17	425 Tabs	2000Tabs	69.00	100'S	1380.00	
9	COUGH SYRUP	BA 13234	6/15		500 Bott	17.00	BOTT	8500.00	
10	CAP. OMIPRAZOLE 20MG	BH 3037	7/15	900 Caps					
		TPC130518	4/16	100 Caps	1000Caps	10.40	10'S	1040.00	
11	TAB. SALBUTAMOL 4MG	SB 0104	3/15		1000Tabs	2.50	10'S	250.00	
12	TAB. GLIMIPRIDE 2MG	AF 3015	1/15		1000Tabs	15.00	10'S	1500.00	
13	TAB. AMLODIPINE 5MG	VCT 3G024	6/15		1000Tabs	5.80	10'S	580.00	
14	TAB. CEFIXIME 200MG	SV 3013	7/15		2000Tabs	60.00	10'S	12000.00	
15	TAB. DOXYCYCLINE 100MG	MT 1380	10/14		600Tabs	26.00	10'S	1560.00	
16	TAB. FLUCONAZOLE 150	BH 3023	5/15		30 Tab	5.80	TAB	174.00	
17	MICONAZOLE OINTMENT	CRK 3005	6/15		100 Tube	18.00	TUBE	1800.00	
18	TAB. ALPRAZOLAM 0.5MG	240ETC	1/15		600 Tabs	4.90	10'S	294.00	
19	CIPROFLOXACIN EYE DROP	BC 840	4/15		30 Bott	8.00	BOTT	240.00	
20	CAP. VITAMIN B COMPLEX	SK 3315	12/14		6000Caps	10.00	10'S	6000.00	
21	CAP. AMOXY + CLAVULANIC	AP 3109	1/15		1200Caps	14.00	CAP	16800.00	
22	TAB. PARACETAMOL KID	D 1354	3/16		500 Tabs	29.00	100'S	145.00	

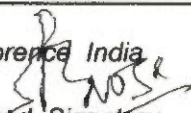
Remarks : **96463.00**
Rupees :

may be released



Chairman
Cooper's Camp Notified
Area Authority

Subject to Kolkata Jurisdiction

For Florence India

Authorized Signatory
FLORENCE INDIA
32, Ezra Street
Room No. 609, 6th Floor
Calcutta-700001

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001
DL. NO. - 5364 SW / 4319 SBW
VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
FAX NO. - 39851542

SALE BILL : FI / MUN / 13 - 14 / 253
BILL DATE : 25.09.2013

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Coopers Camp Municipality
Ranaghat, Dist. - Nadia
West Bengal

ORDER NO 268 / CCNAA

DATE - 21.09.2013
CHALLAN 253
DATE - 25.09.2013

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
		BROUGHT FORWARD							96463.00
23	TAB. CINERIZINE 25MG	BD 12703	11/15		1000Tabs	12.00	10'S		1200.00
24	IRON SYRUP	S 130508	4/15	20 Bott					
		S 130614	5/15	180 Bott	200 Bott	52.00	BOTT		10400.00
25	SYP. MULTIVITAMIN +	16A13027	11/14	150 Bott					
	MULTIMINARELS (Bevon)	16A13031	12/14	350 Bott	500 Bott	58.00	BOTT		29000.00
26	PREG COLOUR CARD	C 201305	5/15		50 Strip	19.50	STRIP		975.00

138038.00

Add V A T @ 5%

6901.90

Remarks :

144939.90

Rupees : One Lakh Forty four thousand Nine hundred Thirty nine & paise Ninety only.

Subject to Kolkata Jurisdiction

For Florence India

Authorised Signatory

FLORENCE INDIA

32, Ezra Street

Room No. 609, 6th Fl

Calcutta-700001

Pay Rs. 24940 = W
(.....)

[Signature]
Chairman
Cooper's Camp N A A
Ar 15/11/14

Passed for Payment Rs. 144940 = 68
(One lakh forty four thousand nine hundred and forty only)

[Signature]
Executive Officer

[Signature]
Chairman

[Signature]
30/09/13

Received cheque no. 929732
Rs 1,20,000/- Dt - 30/09/2013

Pay Rs. 120000 = W (Rupees One
Lakh Twenty thousand only)

[Signature]
Chairman
Cooper's Camp N A A
Ar 30/9/13

LORENUS INDIA
Sanatan Das
Authorized Signator
03/10/2013

Received Rs. 24,940 by
CR. no - 938162 Dt - 15/01/14

LORENUS INDIA
Sujata Downy
17/01/2014
~~Authorized Signator~~

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE CHALLAN : 253

AGENT CODE & NAME :

CHALLAN DATE : 25.09.2013

CUSTOMER NAME & ADDRESS

The Chairman
Coopers Camp Municipality
Ranaghat, Dist. - Nadia
West Bengal

ORDER NO 268 / CCNAA

DATE - 21.09.2013

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG.	EXP.
1	TAB. DOMPERIDONE 10MG	BD 13474		3000Tabs	8/13	7/15
2	TAB. IRON + FOLIC (Large)	HGCF 181		10000Tab	7/13	6/15
3	ORAL REHYDRATION SALT	9764350	1200 Sach		5/13	4/15
		9764352	600 Sach		5/13	4/15
		9764381	200 Sach	2000Sach	5/13	4/15
4	TAB. IBUPROFEN 400MG	T 121015		3000Tabs	10/12	9/15
5	POVIDONE IODINE OINT	279		100 Tube	8/13	7/15
6	TAB. RANITIDINE 150MG	TGL 13345		10000Tab	3/13	2/15
7	TAB. PARACETAMOL 500MG	TGR 13705		7000Tabs	6/13	5/16
8	TAB. METRONIDAZOLE 400	TM 83169	1575 Tabs		7/13	6/17
		TM 83119	425 Tabs	2000Tabs	6/13	5/17
9	COUGH SYRUP	BA 13234		500 Bott	7/13	6/15
10	CAP. OMIPRAZOLE 20MG	BH 3037	900 Caps		8/13	7/15
		TPC130518	100 Caps	1000Caps	5/13	4/16
11	TAB. SALBUTAMOL 4MG	SB 0104		1000Tabs	4/13	3/15
12	TAB. GLIMIPRIDE 2MG	AF 3015		1000Tabs	2/13	1/15
13	TAB. AMLODIPINE 5MG	VCT 3G024		1000Tabs	7/13	6/15
14	TAB. CEFIXIME 200MG	SV 3013		2000Tabs	8/13	7/15
15	TAB. DOXYCYCLINE 100MG	MT 1380		600Tabs	11/12	10/14
16	TAB. FLUCONAZOLE 150	BH 3023		30 Tab	6/13	5/15
17	MICONAZOLE OINTMENT	CRK 3005		100 Tube	7/13	6/15
18	TAB. ALPRAZOLAM 0.5MG	240ETC		600 Tabs	2/13	1/15
19	CIPROFLOXACIN EYE DROP	BC 840		30 Bott	5/13	4/15
20	CAP. VITAMIN B COMPLEX	SK 3315		6000Caps	7/13	12/14
21	CAP. AMOXY + CLAVULANIC	AP 3109		1200Caps	8/13	1/15
22	TAB. PARACETAMOL KID	D 1354		500 Tabs	4/13	3/16

Remarks :

Subject to Kolkata Jurisdiction

For Florence India

Authorised Signatory

FLORENCE INDIA

32, Ezra Street

Room No. 602, 6th Floor

Calcutta-700001

o/c.

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232**

Memo no: 268/CCNAA

Date: 21/09/13

To,
Florence India
Approved Distributors for Gen. Tender (Medicine),
32, Ezra Street, Room No.609
Kolkata-700 001

Sub: - Supply order of the Medicine under CBPHCS

Sir,

Your quotation in the lowest rate has been accepted. You are hereby ordered to supply the following Medicines for use at the Sub-Centers of Coopers Camp Notified Area Authority within ten days (10) from the day of issue of the office order letter.

Sl.No.	Name of medicines	QUANTITY
1	Tab Domperidone (10 mg)	3,000 Tabs
2	IFA Large (60 mg elemental iron)	10,000 Tabs
3	O.R.S.	2000 Packets
4	Tab Ibuprofen (400 mg)	3000 Tabs
5	Povidone Iodine Ointment	100 Pcs
6	Tab Ranitidine (150 mg)	10,000 Tabs
7	Tab Paracetamol (500 mg)	7000 Tabs
8	Tab Metronidazole (400mg)	2,000 Tab
9	Cough Syrup 100 ml Phial	500 phial;
10	Cap Omeprazole 20 mg	1,000 Caps
11	Tab Sulbutamol (4 mg)	1,000 Tabs
12	Tab Glimipride (2 mg)	1000 Tabs
13	Tab Amlodipine (5 mg)	1,000 Tabs
14	Tab Cefixine (200 mg)	2000 Tabs
15	Cap Doxycycline (100 mg)	600 Tabs
16	Tab Fluconazole (150 mg)	30 Tabs
17	Miconazole Ointment(15 gm)	100 Tube
18	Tab Alprozolam (0.5 mg)	600 Tabs
19	Ciprofloxacin Eye Drop	30 Pcs
20	Cap Vitamin B Complex	6,000 Caps
21	Cap Amoxicillin 500 mg + Clavulinic acid (500 mg+ 125 mg)	1,200 Caps
22	Tab Paracetamol Kid (125 mg)	500 Tabs
23	Tab Cinnerizine(25 mg)	1,000 Tabs
24	Iron Syrup (200 ml)	200 Phial
25	Multivitamin Multiminerals Syr (200 ml)	500 Phial
26	Preg Card	50 Pcs



Chairman
Coopers Camp Notified Area Authority

Received
[Signature]

Chairman
Cooper's Camp Notified Area
Authority

Phone : 2235-7094



FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 988

Date 03/10/ 2013

Received with thanks from The Chairman, Coopers

Comp Notified Area Authority

the sum of Rupees one lakh twenty thousand only

in full / Part Payment of our Invoice No. _____

Date 30/09/13 by Cash/Cheque/DD No. 929732

on Allahabad Bank

Rs. 1,20,000/-

* This receipt is valid subject to realisation c



FLORENCE INDIA

For FLORENCE INDIA
Authorized Signatory

FLORENCE INDIA



32, Ezra Street, 6th Floor
R No. 609, Kolkata-700 001
Phone : 033 3985-1542
Tele Fax : 2235-7094
Mobile : 9432141945
E-mail : florenceindia@gmail.com
Web. Site : www.florenceindia.com

To

The Chairman.

Coopers Camp notified
Area Authority
Dist-Nadia. W.B

Date:- 03/10/2013

Respected Sir,

We do hereby authorize Mr. *Sanatan Das* to collect
the payment on behalf of us. His signature is duly attested as under.

Thanking You

Sanatan Das 03/10/2013
Signature of *SANATAN DAS*

FLORENCE INDIA

[Signature]
Authorized Signatory

Yours faithfully
FLORENCE INDIA

[Signature]
Authorized Signatory

Phone : 2235-7094



FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 460

Date 17/01/2024

Received with thanks from the chairman cooper's
camp Noti side Auth.

the sum of Rupees Forty Nine thousand eighty
hundred eighteen only

in full / Part Payment of our Invoice No. _____

Date _____ by Cash/Cheque/D.D. No. 938163

on 15/01/2024

Rs. 49,818/-



FLORENCE INDIA

For FLORENCE INDIA
[Signature]

* This receipt is valid subject to realisation of _____

Final Report
y. 938163
N. 15/1/14
7. 49818=00
CBPHCS
y. 938161
N. 2/1/14
B. 75000=00

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

NOTE SHEET

Executive officer
CCNAA.

An amount of Rs. 75000=00. Rs. (Seventy five thousand) out of Rs. 124117=70, are required to meet up the bill payment towards Florence India, 32, Ezra Street, Kolkata-1, for the purpose of medicine bill payment under Cooper's Camp Notified Area Authority.

The above quoted amount may be disbursed from the head of allocation under CBPHCS.

H
02/01/14

Chairman

From above,

As proposed.

H
02/1/14

Executive officer
CCNAA.

An amount of Rs. 49,818=00. Rs. (Forty nine thousand eight hundred and eighteen) only required to meet up final bill payment towards Florence India, 32, Ezra Street, Kolkata-1, for the purpose of final bill payment in connection with purchasing medicine towards for treatment of poor people living in this area under Cooper's Camp Notified Area Authority.

The above quoted amount may be disbursed from the head of CBPHCS Fund.

H
15/01/14

Chairman

From above,

As proposed.

H
05/01/14

H

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001
 DL.NO. - 5364 SW / 4319 SBW
 VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
 FAX NO. - 39851542

SALE BILL : FI / MUN / 13 - 14 / 383
 BILL DATE : 14.12.2013
 AGENT CODE & NAME :

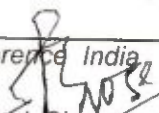
CUSTOMER NAME & ADDRESS The Chairman Coopers Camp Municipality Ranaghat, Dist. - Nadia West Bengal	ORDER NO 377 / CCNAA DATE - 10.12.2013 CHALLAN 383 DATE - 14.12.2013
---	--

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. DOMPERIDONE 10MG	SK 3419	8/15		3000Tabs	52.00	100'S	1560.00	
2	TAB. IBUPROFEN 400MG	KS 3573	9/16		3000Tabs	64.00	100'S	1920.00	
3	POVIDONE IODINE OINT	333	9/15		100 Tube	22.00	TUBE	2200.00	
4	TAB. PARACETAMOL 500MG	9753742	8/16		5000Tabs	7.90	10'S	3950.00	
5	TAB. METRONIDAZOLE 400	TMZ 1301	3/16		3000Tabs	69.00	100'S	2070.00	
6	TAB. PANTOPRAZOLE 40MG	BH 3032	6/15		3000Tabs	20.00	10'S	6000.00	
7	TAB. CETRIZINE 10MG	9764969	9/16		1000Tabs	5.00	10'S	500.00	
8	TAB. GLIMIPRIDE 2MG	AF 3015	1/15		1000Tabs	15.00	10'S	1500.00	
9	TAB. METFORMIN 500MG	BD 13533	8/16		1500Tabs	6.40	10'S	960.00	
10	TAB. AMLODIPINE 5MG	AF 3003	12/14	3000Tab					
		AF 3005	12/14	1000Tab	4000Tabs	5.80	10'S	2320.00	
11	TAB. CEFIXIME 200MG	SV 3023	8/15		3000Tabs	60.00	10'S	18000.00	
12	TAB. CEFIXIME 50MG DT	ARKB2125	10/14		600Tabs	40.00	10'S	2400.00	
13	TAB. CIPROFLOXACIN 500	S O13742	7/16		1000Tabs	32.00	10'S	3200.00	
14	CLOTTRIMAZOLE OINTMENT	CC 3025	9/15		100 Tubes	21.00	TUBE	2100.00	
15	TAB. ALPRAZOLAM 0.5MG	SM 3031	8/15		600 Tabs	4.90	10'S	294.00	
16	CIPROFLOXACIN EYE DROP	BC 960	9/15	25 Phiel					
		BC 819	3/15	5 Phiel	30 Bott	8.00	BOTT	240.00	
17	CAP. AMOXY + CLAVULANIC	B9AEMO71	8/15		600Caps	26.00	6'S	2600.00	
18	TAB. CINNERIZINE 25MG	BD13633	9/16		600Tabs	12.00	10'S	720.00	
19	BECLA. + CLOTRI + GENTA.	224	4/15		100 Tube	22.00	TUBE	2200.00	
20	TAB. RANITIDINE 150MG	T 1306166	2/15	3200Tabs					
		T 1307037	3/15	1800Tabs	5000 Tabs	5.20	10'S	2600.00	
21	COUGH SYRUP	BA 13366	8/15		800 Bott	25.80	BOTT	20640.00	
22	DICLOFENAC SODIUM OINT	SR 317	9/15		50 Tube	22.00	TUBE	1100.00	
23	GAMA BENZYN HEXACHLOR	BH 13030	4/15		15 Bott	32.00	BOTT	480.00	
24	ROLLER BANDAGE 4"	135	1/15		20 Pcs	6.00	PC	120.00	

79674.00
79674.00

Remarks :
 Rupees :

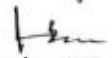
The above items Subject to Kolkata Jurisdiction
are received and
properly entered in the
Stock register
 12/13

For Florence India

 Authorised Signatory
FLORENCE INDIA
 32 Ezra Street
 Room No 609, 6th Fl
 Calcutta 700004


- 75000/-

Passed for Payment Rs 79674000/-


~~Seventy five thousand six hundred and seventy four~~
only


Executive Officer



Chairman


27/12/13.

Pay Rs. 49818 = W
(.....)


Chairman
Cooper's Camp N A A
Ar
15/1/14


Passed for payment of
Rs. 124818 = W (Rupees one lac
twenty four thousand eight hundred
eighteen) only


Chairman
Cooper's Camp Notified
Area Authority

Sun.

Executive Officer
Cooper's Camp Notified
Area Authority

Pay Rs. 75000 = W (Rupees seventy
five thousand) only
(.....)


Chairman
Cooper's Camp N A A

Ar
02/1/14

Received payment by
cheque no - 938161, dated 2.01.14
for Rs 75000/- (Seventy five thousand)

FLORENCE INDIA
Prasanta Sutta
Authorized Signatory 4.01.14

Received Rs. 49,818.00
by ch. no - 938163 dt 15/01/14
FLORENCE INDIA
Sujoya Dutta
17/01/2014

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL. NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE CHALLAN : 383

AGENT CODE & NAME :

CHALLAN DATE : 14.12.2013

CUSTOMER NAME & ADDRESS

The Chairman
Coopers Camp Municipality
Ranaghat, Dist. - Nadia
West Bengal

ORDER NO 377 / CCNAA

DATE - 10.12.2013

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG.	EXP.
1	TAB. DOMPERIDONE 10MG	SK 3419		3000Tabs	9/13	8/15
2	TAB. IBUPROFEN 400MG	KS 3573		3000Tabs	10/13	9/16
3	POVIDONE IODINE OINT	333		100 Tube	10/13	9/15
4	TAB. PARACETAMOL 500MG	9753742		5000Tabs	9/13	8/16
5	TAB. METRONIDAZOLE 400	TMZ 1301		3000Tabs	4/13	3/16
6	TAB. PANTOPRAZOLE 40MG	BH 3032		3000Tabs	7/13	6/15
7	TAB. CETRIZINE 10MG	9764969		1000Tabs	10/13	9/16
8	TAB. GLIMIPRIDE 2MG	AF 3015		1000Tabs	2/13	1/15
9	TAB. METFORMIN 500MG	BD 13533		1500Tabs	9/13	8/16
10	TAB. AMLODIPINE 5MG	AF 3003	3000Tab		1/13	12/14
		AF 3005	1000Tab	4000Tabs	1/13	12/14
11	TAB. CEFIXIME 200MG	SV 3023		3000Tabs	9/13	8/15
12	TAB. CEFIXIME 50MG DT	ARKB2125		600Tabs	11/12	10/14
13	TAB. CIPROFLOXACIN 500	S 013742		1000Tabs	8/13	7/16
14	CLOTTRIMAZOLE OINTMENT	CC 3025		100 Tubes	10/13	9/15
15	TAB. ALPRAZOLAM 0.5MG	SM 3031		600 Tabs	9/13	8/15
16	CIPROFLOXACIN EYE DROP	BC 960	25 Phiel		10/13	9/15
		BC 819	5 Phiel	30 Bott	4/13	3/15
17	CAP. AMOXY + CLAVULANIC	B9AEM071		600Caps	9/13	8/15
18	TAB. CINNERIZINE 25MG	BD13633		600Tabs	10/13	9/16
19	BECLA. + CLOTRI + GENTA.	224		100 Tube	5/13	4/15
20	TAB. RANITIDINE 150MG	T 1306166	3200Tabs		6/13	2/15
		T 1307037	1800Tabs	5000 Tabs	7/13	3/15
21	COUGH SYRUP	BA 13366		800 Bott	9/13	8/15
22	DICLOFENAC SODIUM OINT	SR 317		50 Tube	10/13	9/15
23	GAMA BENZYN HEXACHLOR	BH 13030		15 Bott	5/13	4/15
24	ROLLER BANDAGE 4"	135		20 Pcs	2/12	1/15

Remarks :

Subject to Kolkata Jurisdiction

For Florence India

Authorised Signatory

FLORENCE INDIA

32 Ezra Street

Room No 609, 6th Fl

Calcutta 700001

**OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
P.O.- Coopers Camp :Dist- Nadia :PIN -741232**

Memo no: 377/CCNAA-

Date: 18/12/13

To,
Florence India
Approved Distributors for Gen. Tender (Medicine),
32, Ezra Street, Room No.609
Kolkata-700 001

Sub: - Supply order of the Medicine under CBPHCS

Sir,

Your quotation in the lowest rate has been accepted. You are hereby ordered to supply the following Medicines for use at the Sub-Centers of Coopers Camp Notified Area Authority within ten days (10) from the day of issue of the office order letter.

Sl.No.	NAME OF MEDICINE	QUANTITY
1	Tab Domperidone (10 mg)	3000 Tabs
2	Tab Ibuprofen (400 mg)	3000 Tabs
3	Povidone Iodine Ointment (15 gm)	100 Tubes
4	Tab Paracetamol (500 mg)	5000 Tabs
5	Tab Metronidazole (400mg)	3000 Tabs
6	Tab Pantoprazole (40 mg)	3000 Tabs
7	Tab Cetrizine (10 mg)	1000 Tabs
8	Tab Glimpride (2 mg)	1000 Tabs
9	Tab Metformin (500 mg)	1500 Tabs
10	Tab Amlodipine (5 mg)	4000 Tabs
11	Tab Cefixime (200 mg)	3000 Tabs
12	Tab Cefixime (50 mg DT)	600 Tabs
13	Tab Ciprofloxacin (500 mg)	1000 Tabs
14	Clotrimazole Ointment (15 gm)	100 Tubes
15	Tab Alprozolam (0.5 mg)	600 Tabs
16	Ciprofloxacin Eye Drop	30 Vials
17	Tab Amoxycillin (200 mg) +Clavulinic acid (28.5 mg) Kid	600 Tabs
18	Tab Chlorzime(25 mg)	600 Tabs
19	Beclomethasone + Clotrimazole + Gentamycin Ointment (15 gm)	100 Tubes
20	Tab Ranitidine (150 mg)	5000 Tabs
21	Cough Syrup 100 ml	800 Phials
22	Liver Syrup 200 ml	800 Bottles
23	Diclofenac sodium ointment 15 gm	50 tube
24	Gamma Benzine Hexaefloride 1% 100 ml	15 Bottles
25	Roller Bandage 4"	20 Such

18/12/13
Chairman
Cooper's Camp NAA.
SIBU BAIN
Chairman
Cooper's Camp Notified
Area Authority

Phone : 2235-7094



FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 216

Date 04.01.2014

Received with thanks from The chairman, coopers camp
Notified area Authority

the sum of Rupees Seventy five thousand only

in full / Part Payment of our Invoice No. _____

Date 02.01.14 by Cash/Cheq. No. 938161

on Allahabad Bank

Rs. 75000/-



FLORENCE INDIA

For FLORENCE INDIA

* This receipt is valid subject to realisation of

FLORENCE INDIA



32, Ezra Street, 6th Floor
R No. 609, Kolkata-700 001
Phone : 033 3985-1542
Tele Fax : 2235-7094
Mobile : 9432141945
E-mail : florenceindia@gmail.com
Web. Site : www.florenceindia.com

To

The

Chairman
Coopers camp Notified Area Authority

Date:- 04.01.14

Respected Sir,

We do hereby authorize Mr. PRASANTA DUTTA to collect the payment on behalf of us. His signature is duly attested as under.

Thanking You

Prasanta Dutta

Signature of PRASANTA DUTTA

FLORENCE INDIA

[Signature]
Authorized Signatory

ATTESTED

Yours faithfully
FLORENCE INDIA

[Signature]
Authorized Signatory

Voucher no - 1

କେନ୍ଦ୍ରୀୟ କାଗଜ
କଲ୍ୟାଣ-କ୍ରୀଡ଼ା

ନିର୍ଦ୍ଦେଶ - ୧୨୦୫ (ମେଡ଼ିଆ ସେ. ପ୍ରୋମୋସନ-
୨, ୬, ୧୧୭୦ - ୨୨) ନିର୍ଦ୍ଦେଶ - (ମେଡ଼ିଆ ସ୍ୱାଧି-
କ୍ଷେତ୍ର) କେନ୍ଦ୍ରୀୟ - ଉପ-କ୍ରମାବଳୀ
ସାବନ - ମୋଟ - ୧୨୫ -

୧୦୦.୦୦ ଟଙ୍କା -

/

କୋଟି - ୧୦୦.୦୦ ଟଙ୍କା

Paid by me
Awen.
30.7.12

ଆବଣ୍ଟିକାରୀ,
30.07.12

২০০ টাকা মারফত,

অবগতিতে
৩০.০৭.১২

No

CASH MEMO

Ph. 210-124

383375

AUTO-CARE

Dealer-B.P.C.L.

34, N.H. Way, Ranaghat, Nadia.

Voucher no. 2

Vehicle No. --

WB 52/4353

LITERS	Rate	Amount	
		Rs.	P.
SPEED			
PETROL 1/300	76/03	100/-	
HI-SPEED DIESEL			
DIESEL			
Lc. No. 9/H.S.D./Sale/80 Lc. No. 3/R Lub			
	<i>Paid my me</i> <i>16.8/12</i>	100/-	

Thanking you

16/8/12

FOR SURE
For AUTO-CARE

383372

vacine (150000) (1/2)
21/12

No.

Voucher no 2 **597**

Invoice / Challan

Mobile: 9333524166

CYBER GROUP TM

Voucher no 58

COMPUTER SHOWROOM, HARDWARE & PERIPHERALS

BHANGRAPARA MORE, RANAGHAT, NADIA.

To Collier's notified Authority Date 22.03.12
 Address.....
 Invoice No..... Challan No.....

Sl. No.	DESCRIPTION	SERIAL No.	QTY.	RATE.	AMOUNT Rs.	P.
4	RAM 512		1	675.00	675.00	
	Sub receipt				200.00	
	Part payment Rs. 625/- Date 27/3/12					
	Am paid in full					
	VAT No.			Total	875.00	

Rs: Eight hundred
Seventy Five

For Am
 Cyber Group
 (Authorised Signatory)

FRONTECH	HEWLETT PACKARD	intel	TVSE ELECTRONICS	EPSON	Cyrix
CREATIVE	SAMSUNG	Seagate	SANITON	PRIYA	SONY
AMD	MSI	Mercury	Gold Star LG Electronics	PHILIPS	Microsoft
Micro MICROTEK	D-Link	GIGABYTE	UMAX	APC Legacy Network	

Voucher no - 3

Post payment Rs 250/- done by me.

Axai
05/09/12

Voucher no - 4

1. Ballpoint pens 2 Pcs = 30.00
2. Ballpoint pens 2 Pcs = 56.00
3. Jenis clip 1 = 8.00
4. Cello tape 2 = 10.00
5. Marker Pen 1 = 12.00
6. Pen 20 Pcs = 40.00

Total

156.00

7. P. cutter 2 pcs.

10.00

166.00

26/9/12
for [Signature]
[Signature]
[Signature]

Paid by me.

[Signature]
26.9.12

Handwritten scribbles at the top of the page.

Voucher no - 5

① General Kumbhat
Coil 26.00

Paid by me
Joshi
17.12.12

Paid
14/12/12
6.00
[Stamp]

ARUN PUSTAKALAYA
Book Seller & Order Supplier
Arumda Road
Makati, 24 Perjanis (M)

Voucher No 6

Two Rubber Stamp

Rs. — 120.00

one hundred twenty only

Dika:
22.3.013

Paid by me
Awen:
22.3.13

To
The chairman,
Coopery camp M. A. A.

Voucher no 7

8/7/2013

সহকারী

নিম্নলিখিত হিসাবসমূহের
বসতির চাহিদা মেতে থাকার জন্য
সম্প্রদায় উন্নয়ন থেকে অর্থ
আবদান করা হইছে অত্র
কেন্দ্রে বসতি
কেন্দ্রের কাজ উন্নয়ন
20.00 (বুড়ি টাকা) ক্রয় করা হইবে।

paid by me
A. A.
8.7.13

স্বাক্ষর



নির্বাহক
সহকারী

নং:

ক্যাশ মেমো তারিখ.....

মো স্টেশনারী

Handwritten signature

প্রোঃ-প্রদীপ দাস (বাপীদা)

কুপার্স টাউন মার্কেট * চনং ওয়ার্ড
রানাঘাট * নদীয়া * M:-9378187139

নাম: *কুপার্স স্টেশনারী*

ঠিকানা: *কুপার্স স্টেশনারী*

পরিমাণ	বিবরণ	দর	টাকা	পঃ
10.	<i>২০০৮</i>	7	70	০০
1.	<i>৩০০৮</i>	5	5	০০
			/	
			৭৫	০০

*Paid by me
9-7-13*

9/7/13

মোট

স্বাক্ষর

Voucher no. 9

Chairman
Cooperated camp. N.A.A

30-07-13 ^{बुधवार}
शुभकर साव अर्थात् (बाला नं- 1, 6 and 11)
उभय दिनां यादया वाक्य अमरजाय

- Rs - 60/- (सहस्र)

60/- (सहस्र)

Paid through me
T. S. J.
30/7/13



T. S. J.
Balaramdan

No.

368

Cash memo

Date

14.8.13

NEW TARA MA ELECTRIC

All Kinds of Electric Waring Metarials are
Available here

Voucher
10

RATHALA, RANAGHAT, NADIA

Mob.- 9332973073/9232995512 Ph - 284396

Name

The Chairman

Address

C. C. N. A. A.

Sl No.	Description	Rate	Amount Rs. P.
1.	Fan Cail - 3 P.		750 00
2.	Condencer - 3 P.		75 00
4.	Bairing - 3 P.		100 00
5.	P. V. C. Tar -		55 06
<p>Paid by me Awan 30.8.13</p>		Total-	980 06

Signature—

OFFICE OF THE COUNCILLORS OF
● COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET

E.O.

Repair of 3 Ceiling Fans.

One (1) ceiling fan of Health office and Two (2) ceiling fans of Vaccination Room (P.L. Home) are out of order and need repair. A sum of about 980/- is required for this purpose. Repair may be ordered and the repair cost may be paid from the petty cash lying with me.

Arach.
30/07/13

May be approved as proposed.
Ra
29/7/13

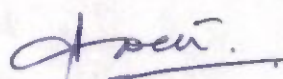
Channan R
30/7/13

To
The Chairman
Coopers Camp NAA
Coopers Camp, Nadia.

Sub: Submission of adjustment bill

With reference to the above subject I am to furnish herewith the adjustment bill drawn on 27-08-2012 (vide cheque no 977790) as follows in favour of your information ,doing necessary action and thus oblige.

Voucher No	Paid on	Paid to	Particulars of Payment	Amount Rs.
1	30-07-2012	Aban Mondal	Rickshaw Van fare for carriage of three(3) steel Racks to three Sub Centers	200.00
2	16-08-2012	Auto Care (Petrol Dealer)	Purchase of fuel for motorcycle to bring Vaccines and other articles from Aranghata	100.00
3	05-09-2012	Cyber GROUP	Part Payment for purchase of RAM 512 for Health Office computer	250.00
4	26-09-2012	Mou Stationary, Coopers Camp	Purchase of Stationary goods	166.00
5	14-12-2012	Mou Stationary, Coopers Camp	Purchase of mosquito coil	26.00
6	22-03-2013	Arun Pustakalaya, Naihati	Making of Two Rubber stamp for use of Health Officer & Sanitary Inspector	120.00
7	08-07-2013	Khokan Das	Rickshaw Van fare for carriage of Chair from Health Office to Nibedita Sub Centre	20.00
8	09-07-2013	Mou Stationary, Coopers Camp	Purchase of Exercise Books, Battery	75.00
9	30-07-2013	Balaram Das	Rickshaw Van fare for carriage of medicines to three Sub Centre	60.00
10	30-08-2013	New TARAMA Electric	Repair of three (3) Ceiling Fans	980.00
11	02-09-2013		Xerox	3.00
			Total	2000.00


Health Officer

ক্যাশ মেমো তারিখ 14/12/13

মৌ স্টেশনারী

প্রোঃ-প্রদীপ দাস (বাপীদা)

Vech-1.

কুপার্স টাউন মার্কেট * চনং ওয়ার্ড
বানাঘাট * নদীয়া * M :- 9378187139

নাম Chairman

ঠিকানা Carpenter's C. N. A. A.

পরিমাণ	বিবরণ	দর	টাকা	পঃ
1	Rim Khata (20 Pcs)	150	150	০০
1	Whitener	15	15	০০
Paid by me Anon. 29/12/13				
			টোট	165 ০০

স্বাক্ষর

নং: 5

ক্যাশ মেমো

তারিখ: 24/12/13

মো স্টেশনারী

প্রোঃ-প্রদীপ দাস (বাপীদা)

Voucher-2.

কুপার্স টাউন মার্কেট * চনং ওয়ার্ড
রানাঘাট * নদীয়া * M :-9378187139

নাম: Chairman

ঠিকানা: Cooper's Camp

পরিমাণ	বিবরণ	দর	টাকা	পঃ
60 Pcs.	Pen used Throw	2.75	165	০০
3 Pcs	Big Bag	33	99	০০
Paid by me Proch 27/12/13				
মোট			264	০০

স্বাক্ষর

Vouch-4

Mobile :- 9332328459

লোকনাথ হার্ডওয়ার

স্বপন মিত্তী Vouch-4

কুপাস বাজার (গোপালনগর রোড),
(রিয়া স্ট্যাণ্ডের সামনে)

Terminator 30/1
100x1 40x10
(Anti-Termite)

and 40x10

paid by me

Area,

30/1/14

নং- 6

ক্যাশ মেমো

তারিখ- 06/02/14

মো স্টেশনারী

প্রোঃ-প্রদীপ দাস (বাপীদা)

Vouch-5.

কুপার্স টাউন মার্কেট * চনং ওয়ার্ড
রানাঘাট * নদীয়া * M:-9378187139

নাম.....Chairman.....

ঠিকানা.....C.C.N.A.A.....

পরিমাণ	বিবরণ	দর	টাকা	পঃ
3	Stamp pad	20	60	00
5	wood pencil	5	25	00
<p>paid by me Anan</p> <p>eighty five only.</p>				
			নোট 85	00

6/2 Sun
স্বাক্ষর

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp NAA</i>
Memo No. & Date : <i>425/CC NAA dt. 17/1/14</i>
Period of Expenditure : <i>June '13</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
Non-Recurring			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
Recurring			
9	Honorarium	38010.00	38010.00
10	Salaries	54190.00	54190.00
11	Rent		
12	Training		
13	Drug	27031.00	27031.00
14	I.E.C		
15	Operating Cost		
Total:		119231.00	119231.00

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>July'13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	38010.00	38010.00
10	Salaries	67630.00	67630.00
11	Rent	15000.00	15000.00
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost		
Total:		120640.00	120640.00

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Aug²13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	<i>38010.00</i>	<i>38010.00</i>
10	Salaries	<i>57550.00</i>	<i>57550.00</i>
11	Rent		
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost	<i>85417.00</i>	<i>85417.00</i>
Total:		<i>180977.00</i>	<i>180977.00</i>

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Sept' 13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u> Bonus :		45600.00	45600.00
9	Honorarium	38010.00	38010.00
10	Salaries	57550.00	57550.00
11	Rent		
12	Training		
13	Drug	120000.00	144940.00
14	I.E.C		
15	Operating Cost		
Total:		261160.00	286100.00

ULB may be informed to book gross exp. in drug head.

Statement of Expenditure (SOE) under CBPHCS

Name of ULB: <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Oct'13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	38010.00	38010.00
10	Salaries	57550.00	57550.00
11	Rent	9000.00	9000.00
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost		
Total:		104560.00	104560.00

Statement of Expenditure (SOE) under CBPHCS

Name of ULB: <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Nov^r 13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	<i>38010.00</i>	<i>38010.00</i>
10	Salaries	<i>57550.00</i>	<i>57550.00</i>
11	Rent		
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost		
Total:		<i>95560.00</i>	<i>95560.00</i>

Statement of Expenditure (SOE) under CBPHCS

Name of ULB : <i>Coopers Camp</i>
Memo No. & Date :
Period of Expenditure : <i>Dec'13.</i>

Sl. No.	Item of Expenditure	Expenditure Booked by ULB (Rs.)	Expenditure maybe accepted SUDA (Rs.)
<u>Non-Recurring</u>			
1	Equipment		
2	Furniture		
3	Construction		
3A	Sub-Centre		
3B	OPD cum Maternity Home		
3C	OPD cum Maternity Home		
4	I.E.C & Materials		
5	Renovation Works		
6	Base Line Survey		
7	Family Schedule, Training manual, HMIS Format & HHw Kit Bag		
8	Strengthening of existing Mnternity Homes & Dispensarics		
<u>Recurring</u>			
9	Honorarium	35510.00	35510.00
10	Salaries	57550.00	57550.00
11	Rent		
12	Training		
13	Drug		
14	I.E.C		
15	Operating Cost		
Total:		93060.00	93060.00

Office of the Councillors of Cooper's Camp Notified Area Authority

P.O:- Cooper's Camp, P.S:- Ranaghat, Dist:- Nadia

Memo No:- 425/CCNAA.

Date:- 17/01/14

From,
The Chairman
Cooper's Camp Notified Area Authority
Cooper's Camp, Ranaghat, Nadia .



PO(A)
FO
28.1.14
27/1/14

To,
The Director
State Urban Development Agency, Health Wing
ILGUS Bhavn, Salt Lake Sector-III, Kolkata-700106

Sub:- Submission of Utilisation Certificate (UC) for the month from JUNE,13 to DECEMBER,13

Utilisation Certificate (From No.S.R.330 A)

Sl No	Letter No.& Date	Amount (in Rs.)
1	28.5.2013	355680
2	17.6.2013	72000
3	16.8.2013	355680
4	16.9.2013	72000
5	26.11.2013	406480
Total		1261840

Certified that out of Rs1261840.00 of Grants-in-aid sanctioned during the year 2013-2014 in favour of C.C.N.A.A. Under this Ministry / Department letter no given in the margin and Rs. 639468.00 of unspent balance of the previous year, a sum of Rs.119524.00 has been utilized for the purpose it was sanctioned and balance of Rs.702784.00 remaining unutilized at the end of the DECEMBER, 2013 quarter has been carried forward to the A/C of next quarter of FY 2013-14

Certified that I have satisfied myself that the condition on which the Grant-in-aid was sanctioned has been dully fulfilled /are being fulfilled and that I have exercised the following checks to see that the mony was actually utilized for the purpose for which it was sanctioned...

KIND OF CHECK EXERCISED

1. Books of Accounts
2. Orginal Bill,Receipts & Vouchers.
3. Bank Statement
4. Physical Progress

Signature of Chairman/Vice-Chairman/E.O.
Cooper's Camp Notified Area Authority

SIBU BAIN
Chairman
Cooper's Camp Notified
Area Authority

Summery Sheet on SOE of Cooper's Camp Notified Area Authority for the month of June 2013 to December,2013

Sl.No	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	Nil
1	Equipment	Nil
2	Furniture	Nil
3	Construction: Not applicable for the present)	Nil
	a) Sub-Centre	Nil
	b) OPD cum Matrenity Home	Nil
	c) OPE	Nil
4	LEC & Materials	Nil
5	Renovation Works	Nil
6	Base Line Salary	Nil
7	Family Schedule,training, manual,HMIS formate & HHW kit Bag.	Nil
8	Strengthening of existing Maternity Homes & Despinarsaries (Not applicable for the Present)	Nil
	Recurring	
9	Honorarium	263570
10	Salaries(Gross)	409570
11	Rent	24000
12	Contingency	Nil
13	Medicine	232448
14	Bonus	45600
15	Opening cost (Sundries,Printing, Postage & Telephone,T.A. / D.A.)	2000
	TOTAL	977188 975188

Arach
22.1.14



Chairman

Coopers Camp NAA

SIBU BAIN

Chairman

Cooper's Camp Notified
Area Authority

Status of Fund received & SOE submitted Upto the month of JUNE 2013 to DECEMBER, 2013

Financial Year	Opening Balance	Fund Received from SUDA(on 28.05.13)	Total Fund Available	SOE sent Upto the month of MAY,13	SOE during the month of June13 to Dec,13	Total SOE	Balance
2007-2008	213000	364000	577000			309245	267755
2008-2009	267755	725000	992755	799586	200580	1000166	-7411
2009-2010	-7411	1290000	1282589	1336376	76988	1413364	-130775
2010-2011	-130775	1165900	1035125	1107879	87070	1194949	-159824
2011-2012	-159824	1576050	1416226	1042531	228200	1270731	145495
2012-13	145495	1592240	1737735	811465	286802	1098267	639468
2013-14	639468	1261840	1901308	221336	975188 977188	1196524 1198524	704784 702784

Approved
22.1.14

Signature of Chairman/E.O.

Signature of Chairman/E.O.


Cooper's Camp Notified Area Authority
SIBU BAIN

Chairman
Cooper's Camp Notified
Area Authority

990 0500
12 90 000


Voucher Details Statement for the month of June, 2013.

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment	Purches of computer & printer, overhead projector etc.	Nil
	Furniture	Almirah, Table, Chair etc	Nil
	Training	Cost of training material	Nil
		Training Fees	Nil
13/6/2013	Medicine	payment to Florence Vide order No 74/CCNAA Dated 13-05-2013	27031
		Rent	Nil
		Operating Expences	Nil
27/6/2013	Honorarium	Honorarium to HHW for the month of June 2013	38010
27/6/2013	Salaries	Salaries to MS Cell Staffs for the month of June 13	54190
		Total	119231


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority
SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority


Voucher Details Statement for the month of July, 2013

Voucher No.& Date			Amount (Rs)
	Furniture	Almirah, Table, Chair etc	
	Training	Cost of training material	
		Training Fees	
17/7/2013	Rent	From February 2013 To June 13 to 3 Sub Centres @ Rs 1000 p.m .	15000 ✓
	contingency	office expense	nil
	Salaries-net	Salaries to Ms Cell	nil
25/7/2013	Honorarium	Honorarium to HHW for the month of July 2013	38010 ✓
	Honorarium	Honorarium to HHW for the month of Feb 2013	
25/7/2013	Salaries	Salaries to MS Cell Staffs for the month of July 13	57550 ✓
25/7/2013	Salaries	Arear Salary to H-O. from April 2013- June 2013	10080 ✓
Total			120640


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority
SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

Voucher Details Statement for the month of August,2013

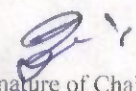
Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		
	Furniture		
	Training		
6/8/2013	Medicine	payment to Florence Vide order No 179/CCNAA Dated 13-07-2013	85417
20/08/2013	Honorarium	Honorarium to HHW for the month of August 2013	38010
20/08/2013	Salaries	Salaries to MS Cell Staffs for the month of August 2013	57550
Total			180977


Signature of Chairman/E.O.
Cooper's Camp Notified Area Authority

SIBU BAIN
Chairman
Cooper's Camp Notified
Area Authority

Voucher Details Statement for the month of September, 2013


Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		
	Furniture		
	Training		
30/9/2013	Medicine	Part payment to Florence Vide order No 268/CCNAA Dated 21-09-2013	120000 144940/-
26/9/2013	Honorarium	Honorarium to HHW for the month of September 2013	38010 ✓
26/9/2013	Salaries	Salaries to MS Cell Staffs for the month of September 13	57550 ✓
25/9/2013	Bonus	Ad Hoc Bonus for H.H.W. and M.S. Cell Staffs for the year of 2012 to 2013	45600 ✓
Total			261160


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority

SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

Voucher Details Statement for the month of October, 2013


Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		
	Furniture		
	Training		
8/10/2013	Rent	From July 2013 To September 13 to Sub Centres @ Rs 1000 p.m .	9000
	Drug		Nil
	Contingency		Nil
22/10/2013	Honorarium	Payment to H.H.W. for the month of October,13	38010
22/10/2013	Salaries	Salaries to Ms Cell for the month of October 13	57550
Total			104560


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority

SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority


Voucher Details Statement for the month of November, 2013

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		
	Furniture		Nil
	Training		Nil
	Drug		Nil
	Contingency		Nil
27/11/2013	Honorarium	Honorarium to HHW for the month of November, 2013	38010
27/11/2013	Salaries	Salaries to MS Cell Staffs for the month of November, 2013	57550
		Total	95560


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority
SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

Voucher Details Statement for the month of December, 2013

Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
	Equipment		Nil
	Furniture		Nil
	Training		Nil
	Drug		Nil
20/12/2013	Honorarium	Honorarium to HHW for the month of December, 2013	35510
20/12/2013	Salaries	Salaries to MS Cell Staff for the month of December, 2013	57550
23/12/2013	Other expences	Opereting Expences	2000
Total			95060 93060 22.1.14


 Signature of Chairman/E.O.
 Cooper's Camp Notified Area Authority
SIBU BAIN
 Chairman
 Cooper's Camp Notified
 Area Authority

OFFICE OF THE COORDINATORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

79435-20
9, 25/7/21 20/1/13
9, 29/5/21
9, 29/5/21

Salaries for the Health officer & M.S Cell Staff for the Month of JUNE, 2013 under CBPHCS

Sl no	Name of Employees	Designation	Gross Pay(in Rupees)	P. Tax(in Rupees)	Net Pay(in Rupees)	Signature
1	Dr Abhijit Kr Nath	Health Officer	22440	130	22310	<i>Abhijit Nath</i>
2	Sajal Biswas	S.I.	6750	45	6705	<i>Sajal Biswas</i>
3	Sisir Kr Mondal	Storekeeper & clerk	6250	45	6205	<i>Sisir Kr Mondal</i>
4	Ashim Das	Health Assistant	6250	45	6205	<i>Ashim Das</i>
Total			41690	265	41425	

Pass for payment Rs 41425.00 (Rupees Forty one thousand four hundred twenty five) only

Chairman
Coopers Camp N A A

Executive Officer
Coopers Camp Notified
Area Authority

Pay Rs

41425.00

Chairman
Coopers Camp N A A

OFFICE OF THE COUNCILLORS OF COOPER'S CAMP NOTIFIED AREA
AUTHORITY

Pay for the Honourary Health Worker for the month of JUNE 2013 under C.B.
P.H. C. S. Programme

Name	Designation	Gross Pay	Net Pay	Signature
Mita Mukherjee	F T S	2670	2670	Mita Mukherjee
Amal Chowdhury	F T S	2670	2670	Aditya Chowdhury
Bandhana Roy Saha	F T S	2670	2670	Bandhana Roy Saha
Suchitra Biswas	H H W	2500	2500	Suchitra Biswas
Uttara Majumder	H H W	2500	2500	Uttara Majumder
Sabita Bapary	H H W	2500	2500	Sabita Bapary
Kalpana Roy	H H W	2500	2500	Kalpana Roy
Aparna Golder	H H W	2500	2500	Aparna Golder
Mamjuri Biswas	H H W	2500	2500	Mamjuri Biswas
Anita Biswas(Das)	H H W	2500	2500	Anita Biswas
Jyotsna Das	H H W	2500	2500	Jyotsna Das
Shibani Mallick(Roy)	H H W	2500	2500	Shibani Mallick
Mona Bapary	H H W	2500	2500	Mona Bapary
Purnima Das	H H W	2500	2500	Purnima Das
Mousumi Sikder	H H W	2500	2500	Mousumi Sikder
Total		38010	38010	

Pay for payment Rs 38010/- (Rs Thirty eight Thousand ten only)

Chairman
Coopers Camp N.A.A

Sum.

Pay Rs 38010/- (Thirty eight thousand ten only)

Chairman
Coopers Camp N.A.A

Executive Officer
Coopers Camp Notified
Area Authority

27/6/13

OFFICE OF THE COLLECTOR
COOPER'S CAMP NOTIFIED AREA AUTHORITY

Salaries of Account Assistant & Computer Assistant for the Month of JUNE, 2013 under
CBPHCS

Sl no	Name	Designation	Gross Pay	P. TAX	Net Pay	Signature
1	BALAI DAS	ACCOUNTS ASSISTANT	6250	45	6205	<i>Balaji Das 24/6/13</i>
2	SAMARESH DAS	COMPUTER ASSISTANT	6250	45	6205	<i>Samareesh Das</i>
TOTAL			12500	90	12410	

Pass for payment Rs. 12410/- (Rupees Twelve thousand four hundred ten) only

Chairman
Coppers Camp NAA

Executive Officer
Coppers Camp Notified
Area Authority

Pay Rs. 12410/-
Chairman
Coppers Camp NAA

122765.5
9. 92422
9. 122765.5

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY
NOTE SHEET

CRPHCS

01/32/80

13/6/11

Rs. 27031

Executive Officer
CCNAA

An amount of Rs. 27031=00.00 (Twenty seven thousand and thirty one) only required to meet up bill payment towards Florence Indis, 32 B21A Street, Kolkata - 700001, in connection with supply of medicine at the health deptt under CRPHCS under Cooper's Camp Notified Area Authority.

The above mentioned amount may be disbursed from the head of allotment for medicine under CRPHCS.


13/06/13

Payment proposed under para. X above may kindly be approved. 13/6/13

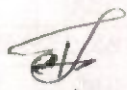
Chairman

25

Passed for Payment Rs. 27031=00.
(Twenty seven thousand and thirty one only)


Executive Officer

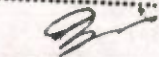

Chairman



13/06/13

Received cheque in full
Rs. 27031. No. 013280
Dt - 13/06/13

FLORENCE INDIA
Suman Das 17/06/13
Authorized Signatory

Pay Rs. 27031=00
(.....)


Chairman
Cooper's Camp N.A.A


13/6/13

RECEIVED
13/06/13
FLORENCE INDIA

OFFICE OF THE COUNCILLORS OF
COOPER'S CAMP NOTIFIED AREA AUTHORITY

P.O.- Coopers Camp :Dist- Nadia :PIN -741232

Memo no: 74/CCAAA

Date: 15/05/13
18/05/13

To,
Florence India.
Approved Distributors for Gen. Tender (Medicine).
32, Ezra Street, Room No.609
Kolkata-700 001

Sub: - Supply order of the Medicine under CBPHCS

Sir,

Your quotation in the lowest rate has been accepted. You are hereby ordered to supply the following Medicines for use at the Sub-Centers of Coopers Camp Notified Area Authority within ten days (10) from the day of receipt of the office order letter.

Sl. NO.	Name of medicine	quantity
1	Tab Ranitidine 150 mg	10000 tabs
2	Tab Paracetamol 500 mg	5000 tabs
3	Tab Cefixime kid 50 DT	600 tabs
4	Cap IFA Large	10000 caps
	Tab Amlodipine 5mg	5000 tabs
6	Tab Cetirizine 10 mg	1500 tabs
7	Tab Alprazolam 0.5 mg	600 tabs
8	Tab Salbutamol 4 mg	1500 tabs
9	Tab Cimerizine 25 mg	1000 tabs
10	Tab IFA small kid	2000 tabs
11	Cap V a B Complex	3000 caps



Chairman

Coopers Camp Notified Area Authority
Chairman

Cooper's Camp Notified
Area Authority



FLORENCE INDIA

32, EZRA STREET, 6th Floor, Room No. 609, KOLKATA-700001

No. 142

Date 17/06/2013

Received with thanks from The Chairman, C.C. W. A. A

the sum of Rupees Twenty-Seven thousand Thirty-one only

in full / Part Payment of our Invoice No. _____

Date 13/06/13 by Cash/Cheque/DD No. 013280

on Allahabad Bank **FLORENCE INDIA**

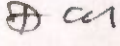
Rs. 27,031/-



* This receipt is valid subject to realisation of

For **FLORENCE INDIA**

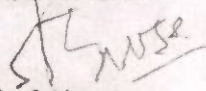
Respected Sir,

We do hereby authorize Mr. Sanatan Das  to collect the payment on behalf of us. His signature is duly attested as under.

Thanking You

Sanatan Das 17/06/2013
Signature of SANATAN DAS

FLORENCE INDIA


Authorized Signatory

Yours faithfully
FLORENCE INDIA


Authorized Signatory

ATTESTED

13/6/13
2031
ven
p th
B21K
lyig
del
del

FLORENCE INDIA



32, Ezra Street, 6th Floor
R No. 609, Kolkata-700 001
Phone : 033 3985-1542
Tele Fax : 2235-7094
Mobile : 9432141945
E-mail : florenceindia@gmail.com
Web Site : www.florenceindia.com

To
The Chairman,
camp (C.N.A.A)
Coopers Municipality
Dist. Nadia, W. B.

Date:- 17/06/2013

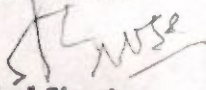
Respected Sir,

We do hereby authorize Mr. Sanatan Das to collect the payment on behalf of us. His signature is duly attested as under.

Thanking You

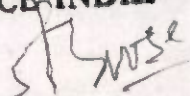
Signature of Sanatan Das 17/06/2013
SANATAN DAS

FLORENCE INDIA


Authorized Signatory

ATTESTED

Yours faithfully
FLORENCE INDIA


Authorized Signatory