

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 2018

তারিখ 17.01.2008

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
Current Account No.10836424685.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Drafts as per details given below, debiting the amount from this office Current Account No.10836424685 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (In Rs.)	SBI Branch
040360 1.	Chairman, Taherpur N.A.A.	2,16,000.00	Ranaghat
040361 2.	Chairman, Dubrajpur Municipality	3,72,000.00	Dubrajpur
dt 21.1.08 Total		5,88,000.00	

(Rupees Five Lakh Eighty Eight Thousand only)

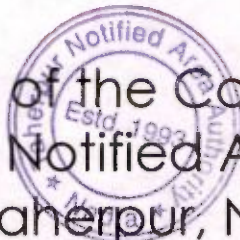
18/01/08

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

17/1/08

(C. Sircar)
Director
SUDA

Office of the Councillors of
Taherpur Notified Area Authority
Taherpur, Nadia



Memo No : २२६ /07-08/T.N.A.A

Dated : 9/01/2008

From : Chairman



To
The Director,
State urban Development Agency,
Health Wings,
SUDA Bhavan, Salt Lake city,

Sub. : Requisition of fund for the period of
Jan-08 to Mar-08.

Dear Madam,

Hereby I am sending Requisition of fund for the period of Oct-07 to Dec-07 under Community Based primary Health Care Service in 63 Non-KMA ULBs as per your given proforma and next grant with co-operation is expected your end and oblige.

Thanking You.

Encl.: As Stated above.

Yours faithfully,

Ashajio 09.1.08

Chairman
Taherpur Notified Area Authority
(Aparna Bhattacharjee)

Fund released = 2.16 + 1.01 + 2.88 = 6.05 lakhs
SOE submitted = 4,90,785/- (upto Nov, 07)
(81.12%)

Rs 2.16 lakhs may be released,
16.1.08

Office of the Councillors of
Taherpur Notified Area Authority
Taherpur, Nadia

Requisition of fund for the period Jan.-08 to Mar.-08

Sl. No	Item of Expenditure	Amount (Rs.)	Sl. No	Item of Expenditure	Amount (Rs.)
Non-Recurring			Recurring		
1.	Equipment		9.	Honorarium	39,000.00
2.	Furniture		10.	Salaries	84,000.00
3.	Construction		11.	Rent	
a)	Sub. Centre		12.	Training	
b)	OPD Cum Maternity Home		13.	Drug	72,000.00
c)	OPD		14.	I.E.C.	6,000.00
4.	I.E.C. & Materials		15.	Operating cost (Sundries, Printing, Postage & Telephone, T.A./D.A. etc.)	15,000.00
5.	Renovation Cost				
6.	Baseline Survey				
7.	Family Schedule, Training manual, HMIS Formate & HHW Kit bag.				
8.	Strengthening of existing maternity Homes & Dispensaries.				
				Total (Rs.)	2,16,000.00

Shaji
Chairman
Taherpur Notified Area Authority
Taherpur, Nadia
09.1.08



Office of the Councillors
DUBRAJPUR MUNICIPALITY
 P.O.- Dubrajpur, Dist.- Birbhum.

S.T.D. Code : 03462
 Phone : Dubrajpur - 244362
 Fax No.- 244362

Memo No. 20 /DM/2008

Date 7/11 2008



To,
 The Director. SUDA
 Health Wings
 ILLGUS Bhavan, H.C. Block
 Sector-III, Kolkata-700091

Sub:- Requisition of Fund for the period October to December 2007.

Sir,
 We had received a Fund of Rs.228000.00, DD.No.319902 Dt-14.9.2006. as 1st installment and it has exhausted. So we are sending a fresh requisition of Fund for the period of October'07 to December' 2007. The Requisition of format is enclosed here with.

Yours faithfully,

[Signature]
 Chairman
 Dubrajpur Municipality
 Birbhum

Fund released 2.28 lakhs

SoE submitted = 1,74,204/- (upto Oct. 07)
 (76.41%)

Rs. 3.72 lakhs may be released
[Signature]
 16.11.08

FROM : CHAIRMAN DUBRAJPUR MUNICIPALITY, PHR...

TO : THE DIRECTOR, SUDA, HEALTH WINGS, ILLGUS BHAVAN, H.C. BLOCK, SECTOR-III, KOLKATA-700091

DATE: 16/11/08

সুডা

SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 "ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং..... SUDA-67/2006/ 1959

তারিখ..... 09.01.2008

From : Director, SUDA

To : The Treasury Officer,
Bidhannagar Treasury.**Sub : Submission of cheque for enfacement****L.F. A/C No.002 008**

Sir,

Enclosed please find one cheque in favour of SUDA-A & OE Fund.

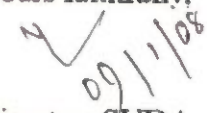
Sl. No.	Name of the Payee	Cheque No.	Cheque Date	Amount (Rs.)
01.	Chairman. Santipur Municipality	D 006023	08.01.2008	8,19,000/-
T o t a l				8,19,000/-

The above funds are required for immediate disbursements.

I would request you to enfance the aforesaid cheque at an early date.

Encl. : One Cheque.

Yours faithfully,


 Director, SUDA

দূরভাষ : ২৩৫৮ ৬৪০৩/৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : dirsudawb@yahoo.com

B. S. 19/11/07
 my de palem
 07.01.08

Community Based Primary Health Care Services in 63 NON-KMA ULBs

Name of the Municipality: SANTIPUR
 For the month of _____,

Requisition of fund for the period from 13.12.2007 to 12.03.2008

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1.	Equipment (Rs.25000 X 9)	2,25,000	9.	Honorarium Rs.46000 X 3	1,38,000
2.	Furniture (RS.20000 X 9) Training furniture (Rs. 50,000-13,750) Furniture for MS CELL	1,80,000 36,250 80,000	10.	Salaries Rs. 20000 X 3	60,000
3.	Construction (Not applicable for present)		11.	Rent	
	a) Sub-Centre		12.	Training	
	b) OPD cum Maternity Home		13.	Drug	1,00,000
	c) OPD		14.	I.E.C	
4.	I.E.C. & Materials		15.	Operating Cost (Sundries, printing, postage & telephone, TA/DA etc	
5.	Renovation Works				
6.	Base Line Survey				
7.	Family Schedule, Training manual, HMS format & HHW kit				
8.	Strengthening of existing Maternity Home & Dispensaries (Not applicable for the present)				
				TOTAL	8,19,250

[Signature]
 13/12/07

Signature of Chairman/Vice-Chairman



সুডা

SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 1959

তারিখ 09.01.2008

From : Director, SUDA

To : The Treasury Officer,
Bidhannagar Treasury.Sub : Submission of cheque for enfacement

L.F. A/C No.002 008

Sir,

Enclosed please find one cheque in favour of SUDA-A & OE Fund.

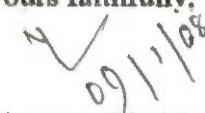
Sl. No.	Name of the Payee	Cheque No.	Cheque Date	Amount (Rs.)
01.	Chairman. Santipur Municipality	D 006023	08.01.2008	8,19,000/-
T o t a l				8,19,000/-

The above funds are required for immediate disbursements.

I would request you to enface the aforesaid cheque at an early date.

Encl. : One Cheque.

Yours faithfully,


 Director, SUDA

দূরভাষ : ২৩৫৮ ৬৪০৩/৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : dirsudawb@yahoo.com

Ajoy De

Member, W.B. Legislative Assembly
Chairman, Santipur, Municipality



Ch. Lohm,
24.12.07

Code : 953472
Phone : Office - 278029
Fax : 277170
Resi. 278262
Chamber - 278111

Ref. No. - 3792/4/24



Date : 15/12/07



To
The Director
State Urban Development Agency,
"ILGUS BHAWAN", HC-Block,
Sector-III, Bidhannagar,
Kolkata- 700 091.

P.O. (H)
18/12

Madam,

Sub: Submission of Requisition of fund as per prescribed format for the period from 14.12.2007 to 13.03.2008 Community Based Primary Health Care Services in Santipur Municipality.

With reference to above, please find enclosed herewith "Requisition of fund as per prescribed format for the period from 13.12.2007 to 12.03.2008 Community Based Primary Health Care Services in Santipur Municipality.

Hope you will find in order.

Thanking You,

Yours faithfully.


Chairman
Santipur Municipality.

Encl: As stated.

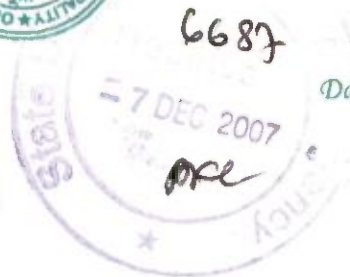
Ajoy De

Member, W.B. Legislative Assembly
Chairman, Santipur, Municipality



Code : 953472
Phone : Office - 278029
Fax : 277170
Resi. 278262
Chamber - 278111

Ref. No. - 3713/4/24



Date : 4/12/07

To
The Director,
State Urban Development Agency (SUDA).
Heath Wing, "ILGUS BHAVAN"
H-C Block, Sector-III, Bidhannagar,
Kolkata-700 091.



Sir,

Sub: Requisition for fund.

With reference to the above matter, this is to inform you that the closing Balance of the H.H.W. fund of our municipality as on 04.12.2007 is Rs.1,00,031/- (Rupees one lacs thirty one only) which is below 70% of 1st installment of Rs. 3,37,000/-.

Therefore, you are requested to kindly release of 2nd installment of fund to meet up various expenditure in connection with Community Based Primary Health Care Service.

Thanking You,

Fund released 3.37 lacs
So far submitted 1,89,886/-
(upto october, 07)
(56.35%)
600/- Nov, 07
91,883/- Dec, 07
2,82,369/-
(83.7%)

Yours faithfully,

(Signature)
4.12.07

Chairman
Santipur Municipality.

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, HC Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 1853

তারিখ 27.12.2007

From : Financial Adviser, SUDA

To : The Treasury Officer,
Bidhannagar Treasury.**Sub : Submission of cheque for encasement****L.F. A/C No.002 008**

Sir,

Enclosed please find two cheques in favour of SUDA-A & OE..

Sl. No.	Name of the Payee	Cheque No.	Cheque Date	Amount (Rs.)
01.	Chairman, Taki Municipality	D 005294	17.12.2007	2,28,000.00
02.	Chairman, Jiagunj-Azimgunj Municipality	D 005295	17.12.2007	3,89,000.00
T o t a l				6,17,000.00

The above funds are required for immediate disbursements.

I would request you to encase the aforesaid cheques at an early date.

Yours faithfully,

Encl. : Two Cheques.


 Financial Adviser, SUDA

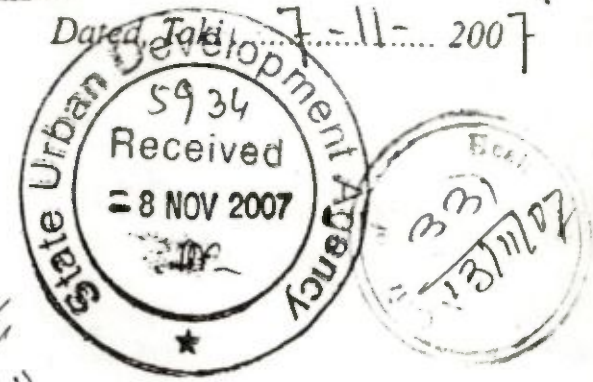
Fax & Q.
Office : (953217) 234 481 / 233 324
Resi : (953217) 233 285
Guest House (953217) 233 326
Night Shelter : (953217) 234 007

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI
P.O. : TAKI * DIST. : NORTH 24 BARGANAS



No. 402/T.M.
From : Dilip K. Banerjee
Chairman
Taki Municipality

Dated Taki 7-11-2007



To :
The Director SUDA
H.C. Block, Sector-III
ILGUS BHAVAN
Bidhangar,
Kolkata - 700091

PO(A)
L
7/11

SUB :- STATEMENT OF EXPENDITURE

Sir,

As per your letter no.-SUDA-Health/63 ULBS/58, dated-19/09/2006
Statement of expenditure in connection with details of expenditure and
Xerox copies of payment vouchers are enclosed herewith for your kind
information.

Thanking you,

Yours faithfully,

(D.K. Banerjee)
CHAIRMAN
Taki Municipality
PRESIDENT
Taki Poura Health &
Family Welfare Samity

Hand received 2.27+4.30
= 6.57 lakh
SOE submitted = 5,70,781/-
(1.81.07)
(upto Oct, 07)

Signature
Taki M

REQUISITION OF FUND FOR THE PERIOD OF OCTOBER-'07 TO DECEMBER-'07

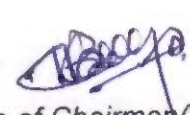
[For four (4) Sub-Centres]

TAKI MUNICIPALITY

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	<u>NON-RECURRING</u>			<u>RECURRING</u>	
				B/F=	120000.00
1*	Equipment (for M&S Cell- Computer)	1,20,000.00	9*	Honorarium	48,000.00
2	Furniture		10*	Salaries	60,000.00
3	Construction Not applicable for the present		11	Rent	
	a) Sub-Centre		12	Training	
	b) OPD cum Maternity Home		13	Drug	
	c) OPD		14	I.E.C.	
4	I.E.C. & materials		15	Operating Cost (Sundries, printing, postage & telephone)	
5	Renovation Works				
6	Base Line Survey				
7	Family Schedule, Training Mannual HMIS format & HHW kit.				
8	Strengthening of existing Maternity Home & Dispensaries. (Not				
	TOTAL=	1,20,000.00		TOTAL=	228000.00

- 1* Requirements for purchasing Computer and allied peripherals
- 9* Requirements for Honorarium to HHWs for 3 months
- 10* Requirements for Salary to be paid to Contractual engagement of 4 nos. Health Staffs for 3 months

*Rs. 2,28,000/- only
14.12.07*



Signature of Chairman/Vice Chairman

Requisition of Fund for the period 1st Dec '07 to Feb ' 2008

SL No.	Item of Expenditure	Expenditure (Amount in Rs.)	S L No.	Item of Expenditures	Expenditure (Amount in Rs.)
	Non Recuring			Recurring	
1	Equipment		9	Honorium	60360=00
2.	Furniture		10	Salaries	94,500=00
3	Construction		11	Rent	15,000=00
	a. Sub-Centre		12	Training	
	b. OPD Cum Maternity Home		13	Drug	2,00,000=00
	c. OPD.		14	IEC	
4	IEC & Matrials		15	Operating Cost (sundries Printing, postage telephone TA/ DA	20,000=00
5	Renovation works				
6	Base Line Survey				
7	Family Shedule Trainming manual HMS format &HHW Kit				
8	Strenghenning of existing maternity Home & Dispensaries				
				Total	3,89,860=00=00 3,89,860=00

This is to certify that the amount as shown in the statement has not been preferred earlier

*Rs. 3.89 Lakhs
my cc. balance
14.12.07*

Signature 10-12-07
Chairman/ Vice-Chairman, Jiaganj-Azimganj
Municipality

Chairman
Jiaganj Azimganj Municipality

Office of the Councillor
Community Based Primary Health Care Services
Under

Jiaganj- Azimganj Municipality

P.O. Jiaganj Dist. Murshidabad

Phone No. (03483) 253222

Consolidated Pay Sheet for the month of .Dec'07 to Feb' 08

Notification No. 111- MA/ C - 10 / 38- 2005-2006 Dated 02.02.07

Sl. no	Name of the employee	Designation	Working day	Consolidated pay	Net pay	Signature of payee	Remarks
1	Dr. J.N. Pal	Medical Officer		Rs. 6000=00	Rs.18,000		
2	Pradip Kr. Bose	Sainatary Inspector		Rs. 5,500=00	Rs.16500		
3	Biswajit Shee	Accounts Assistant		Rs. 5000=00	Rs. 15000		
4.	Jayanta Chakroborty	S. K. Clerk		Rs. 5000=00	Rs. 15000		
5	Partha Kumar Das	Health Assistant.		Rs. 5,000=00	Rs. 15000		
6	Sanjib kumar Nandy	Computer Assistant.		Rs. 5000=00	Rs. 15000		
					Rs.94,500		

(Rupees Ninety four thousand five hundred) only

S. Nandy
Chairman
10-12-07

Jiaganj-Azimganj Municipality
Chairman

Jiaganj Azimganj Municipality

Office of the Councillor
Jiaganj-Azimganj Municipality

Annexure III

Community Based Primary health Care Services

Azimganj Murshidabad

Phone No. (03483) 253222

Honourarium for the month Dec'07 to Feb'08 for the HHWs of CBPHC's under
Jiaganj-Azimganj Municipality

1. Sonali Bhattacharjee
2. Shibani Das
3. Lipika Ghosh
4. Archana Dhar
5. Reba Ghosh
6. Aparna Biswas (In place of Rita Dey (Das) who has left her engagement under intimation from 1st Nov'07 her position was Sl. no. 2 of the pannel)
7. Archana Sarkar
8. Sonali Halidar
9. Rina Roy
10. Rakhi Mani
11. Sabita Das (In place of Joyeeta Mahato (Bhakat) who has left her engagement under intimation from 1st Sept'07 her position was Sl. no. 1 of the pannel)
12. Sarathi Mandal
13. Mita Saha (Das)
14. Mina Chandra (Mandal)
15. Anita Rani Muzumder
16. Chandana Das
17. Tulsi Saha

Total HHWs = 17X1000/-=17000X3=51,000/-

S. Mandal
Chairman
Jiaganj-Azimganj Municipality
Chairman
Jiaganj Azimganj Municipality

Office of the Councillor
Jiaganj-Azimganj Municipality

Annexure IV

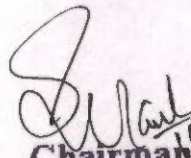
Community Based Primary health Care Services

Azimganj Murshidabad

Phone No. (03483) 253222

Honararium for the month of January'08 to
Feb'08 for the first Tier Supervisor of CBPHCs
under Jiaganj-Azimganj Municipality.

Total F.T. Supervisor's = 4XRrs. 1170/- X 2 month =Rs. 9360/=


Chairman

Jiaganj-Azimganj Municipality

Chairman

Jiaganj Azimganj Municipality

OFFICE OF THE COUNCILLORS OF ARAMBAGH MUNICIPALITY

ARAMBAGH ★ HOOGHLY

Phone : (03211) 255030/257467, Fax : 255-030

Ref. No. *S/C.B.HCS/A.M.*



Date *28-11-07*

To
The Director,
SUDA
Health Wigh,
SUDA Bhaban,
H.C. Block, Sector-III,
Bidhannagore, Kolkata-91.

Sub: Requisition of fund for Community Based
Pry. Health Care Services of Arambagh
Municipality.

Dear Madam,

In continuation to this office letter No.4/CBPHCS/
A.M. dt. 19.11.07, I am enclosing herewith Requisition of
fund in the prescribed proforma for the months of OCT'07 to
Dec. '07 in respect of Community Based Pry. Health Care
Services of Arambagh Municipality.

I, now, request you kindly to release fund as per ~~the~~
the said requisition at your earliest convenience.

Thanking You,

*Hand released 2.36 lakhs
SOP submitted 19/11/07 - (upto October, 07)
- Checked.
(8.11.07)*

Yours faithfully,

Genl.
Chairman,

Arambagh Municipality.

*Rs. 6.62 lakhs
was be released.*

Arambagh Municipality.

Requisition of fund

Requisition of fund for 3 months is to be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

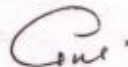
Requisition of fund for the period October'07 to December, 2007

Sl. No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1.	Equipment (Computer+Fax+ M&S Cell+ 4 S.C.)	Rs.2,70,000/-
2.	Furniture (4 S.C.)	Rs. 80,000/-
3.	Construction : (Not applicable for the present)	-
	a) Sub-Centre	-
	b) OPD cum Maternity Home	-
	c) OPD	-
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 (Not applicable for the present)	-
Recurring		
9.	Honorarium	Rs.66,000/- ✓
10.	Salaries	Rs.94,500/- ✓
11.	Rent	Rs.12,000/- ✓
12.	Training	-
13.	Drug	Rs.3,84,000/-
14.	I.E.C. (Hoarding+ Hand Bill etc.for S.C.)	Rs. 10,000/-
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	Rs. 40,000/-
TOTAL		Rs.9,56,500/-

(Rupees nine lakh fifty six thousand & five hundred) only.

Signature of Chairman / Vice-Chairman

Fund


 Chairman,
 Arambagh Municipality

Phone No.240008
241279
STD.-03472

P
7.6.07
14.7.07
13.9.07
26.10.07
24.8.07
4616
1089
52663
1230 ✓
40480 ✓
86433 ✓

Office of the Board of Councillors
NABADWIP MUNICIPALITY

TOTAL 189511.00

P.O.-Nabadwip, Dist.-Nadia

Memo No 779/F-31 /MMC/NM/07

Date- 17.10.2007

From-Sri Pundarikakshya Saha,Chairman, Nabadwip Municipality
P.O Nabadwip Dist.- Nadiia.



To,
The Director
State Urban Development agency,
Health Wing, ILGUS Bhavan,
H-C Block, Sector-III,
Bidhannagar,Kolkata-700091.

Sub:-Requisition of Fund in connection with Community Based
Primary Health Care Service

Sir/Madam,

In reference to your letter no. SUDA-Health/63/ULBs/Accts/07/302 dated 8.8.2007 I am submitting the requisition of fund for the period from August,2007 to October, 2007 in the prescribed form in connection with Community Based Primary Health Care Service.

Please do the needful at your earliest.

With thanks,

Yours faithfully,

Letter 128th vide no
521 dt. 21.10.07



Bala
Chairman,
Nabadwip Municipality

Chairman
Nabadwip Municipality

Fund released 3.06 lacs
58,368/- (checked) (upto June)
86,433/- July
4,230/- Aug.
40,480/- Sep.
1,89,511/-
38,600 Oct.
2,28,111 (74.51%)

Requisition of fund for 3 (three) months is to be submitted by the Chairperson/Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

Requisition of fund for the period August to October 2007.

Sl.No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1.	Equipment	10000.00
2.	Furniture	130000.00
3.	Construction:(Not applicable for the present)	
	a) Sub-Centre	
	b)OPD cum Maternity Home	
	c)OPD	
4.	I.E.C&Materials	50000.00 ✓
5.	Renovation Works	100000.00 ✗
6.	Base Line Survey	
7.	Family Schedule, Training manual, HMIS format &HHW Kit bag.	
8.	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	
Recurring		
9.	Honorarium	114000.00
10.	Salaries	76500.00
11.	Rent	
12.	Training	
13.	Drug	192000.00
14.	I.E.C	50000.00 ✗
15.	Operating Cost(Sundries, printing, postage &telephone ,TA/DA etc)	30000.00
Total		752500.00

B.S. 52 lachy
may be released.
Thru A/c prjce DD,
22.11.07

Bala...

Signature of Chairman /Vice-Chairman.

Chairman
Sehadwin Municipality

FORM OF UTILISATION CERTIFICATE PRESCRIBED IN S.R.300A OF TREASURY RULES, WEST BENGAL AND THE SUBSIDIARY RULES MADE THERE UNDER. VOLUME-1

Utilisation Certificate in the Form Prescribed Under S. R. 300A.

Head of .../c Community Based Primary Health
Centre, Panchajanya, P.O. (B) Bhatnagar, U.S.D.

Certified that out of Rs. 2,06,000.00 (Rupees Two Lakh six
thousand only) only of grants-in-aid
as sanctioned during the year 2004-07 in favour of Bhatnagar Municipality
under the Department of Municipal Affairs, Government of West Bengal, Order No. given in the margin and
Rs. Nil on account of unspent balance of the previous year a sum of
Rs. 2,28,210.00 has been utilised for the purpose of which it was sanctioned
and that the balance of Rs. 77,889.00 remaining unutilised at the end of the year
has been surrendered to Government vide No. _____

Sl. No. G.O.No. & Date Amount (In Rs.)

1. No. SUDA-Health/BIS U.S.D./06/197 dt. 23.11.06. 2,06,000.00

_____ dated _____ and will be adjusted towards the grants-in-aid payable during the year.

2. Certified that I have satisfied myself that the condition which the grants-in-aid was sanctioned have been duly fulfilled and that I have exercised to following checks to see that the money was actually utilised for the purpose for which are exercised.

KINDS OF CHECK EXERCISED

- (i) Plan, Estimate & Tender. (ii) Measurement Book, (iii) Work Register, (iv) Site Verification, (v) Cash Voucher.

3. Grants-in-aid was drawn under T. V. No. _____ dated _____

Office of the Councillors of Sonamukhi Municipality

Pending file

P.O.- SONAMUKHI ★ DIST.- BANKURA

From :

Kushal Bandyopadhyay

Chairman
SONAMUKHI MUNICIPALITY



☎:(03244) 275-238 [O]
275-654 [R]
Mob.: 9434330450

Memo No. 672/HHW/SM

Dated 03/11/2007

To
The Director,
State Urban Development Agency,
Health Wing, ILGUS BHABAN,
HC-Block, Sector-III, Bidhannagar,
Kolkata-700091.



Sub :- Request for release of 2nd instalment of fund in continuation with C.B.P.H.C.

S i r,

This is to inform you that sum of Rs.2,22,000/- (Rupees two lakhs twenty two thousand has been released by you vide your Memo No.SUDA-Health/63-ULBs/06/69 dated 19/9/2006, out of which a sum of Rs.2,09,458/- (Rupees two lakhs nine thousand four hundred fifty eight) only has been expended upto 10/2007 leaving a balance of Rs. 12,542/-.

So, you are requested to release 2nd instalment of fund in continuation with C.B.P.H.C.

The Utilisation Certificate has already been forwarded to you vide this office Memo No.607/HHW/SM dated 13/10/2007.

Please treat this very urgent.

Yours faithfully,

Kushal Bandyopadhyay
Chairman,
Sonamukhi Municipality.

And released 2.22 lakhs

<i>3,600</i>	<i>April</i>
<i>0</i>	<i>May</i>
<i>70,425</i>	<i>June</i>
<i>2,500</i>	<i>July</i>
<i>15,000</i>	<i>Aug.</i>
<i>15,000</i>	<i>Sept.</i>
<i>1,06,058</i>	<i>Oct.</i>
<hr/>	
<i>2,17,583</i>	<i>(98%)</i>

**Community Based Primary Health Care Services
in 63 Non-KMA ULBs**

*Rs. 6.24 Lakhs
min be returned
JK*

Name of the Municipality ...Sonamukhi.....

Requisition of fund for the period November, 07 to January, 08

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non-Recurring		
1.	Equipment (including sub-centre equipment)	1,25,000/-
2.	Furniture (including sub-centre equipment)	1,00,000/-
3.	Construction : (Not applicable for the present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
Recurring		
9.	Honorarium	45,000/-
10.	Salaries	94,500/-
11.	Rent	9,000/-
12.	Training	-
13.	Drug	2,00,000/-
14.	I.E.C.	6,000/-
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	45,000/-
	TOTAL	6,24,500/-



Signature of Chairman / Vice-Chairman

Sonamukhi Municipality

FORM OF UTILISATION CERTIFICATE PRESCRIBED IN S. R. 330A
OF THE TREASURY RULES , WEST BENGAL AND THE SUBSIDIARY.
RULES MADE THEREUNDER , VOLUME - 1 .

Utilisation Certificate in the form prescribed under SR 330A

Certified that out of Rs. 2,22,000/- (Rupees two lakh twenty two thousand only)
of grants - in-aid for community based primary Health care service as sanctioned during the year 2006-07
in favour of Sonamukhi Municipality under the Department of Municipal Affairs . Government order No. given in the
margin and Rs. 1,10,475/- on account of unspent balance of the previous year a sum of Rs. 1,06,458/-
has been utilised for the purpose of which it was sanctioned and that the BALANCE of Rs. 4,417/-
remaining unutilised at the end of the month of October, 07 quarter

Sl. No.	G. O. No. & Date	Amount.
1.	No. SUDA-Health/63 ULBs/06/69 dated 19/09/2006 (1st instalment)	Rs. 2,22,000/-

dated and will be adjusted towards the grants-in-aid payable during the next year .

2. Certified that I have satisfied myself that the condition which the grants - in- aid was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilised for the purpose for which are exercised .

KINDS OF CHECKS EXERCISED :-

- | | |
|------------------------------|-------------------------|
| 1. Plan , Estimate & Tenders | 2. Measurement Book . |
| 2. Work Register . | 4 . Site Verification . |
| 5. Cash Voucher . | 6 . |
| 7. | 8 . |

3. Grants - in - aid was drawn under T . V . No. Dt



Chairman
Sonemukhi Municipality

Submission of Requisition Fund:

Requisition of fund for 3 months isto be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

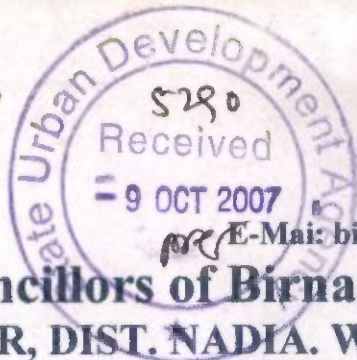
Requisition of fund for the period Oct'07 to Dec'2007.

Sl. No.	Items	Requisitioned Amount in Rs.
	Non-Recurring	
1.	Equipment	
2.	Furniture	
3.	Construction: (Not applicable forthe present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
	Recurring	
9.	Honorarium	27,000/-
10.	Salaries	63,000/-
11.	Rent	
12.	Training	
13.	Drug	
14.	I.E.C.	
15.	Operating Cost (Sundries, Printing,Postage & Telephone, TA / DA etc.)	18,000/-
	TOTAL	1,08,000/-

Rs. 1.08 lakhs
may be released

Chairman
Mirk Municipality
Mirk

Signature of Chairman / Vice-Chairman



No.03473260227

Fax No.03473260227

E-Mail: birnagar.2007 @ Yahoo.co.in.

**Office of the Councillors of Birnagar Municipality
P.O. BIRNAGAR, DIST. NADIA. WEST BENGAL**

From:

Sri Nanda Dulal Roy
Chairman, Birnagar Municipality
Sri Partha Kumar Chatterjee
Vice-Chairman, Birnagar Municipality

Memo No. 1016

Dated Birnagar the 8th Oct '07

To,
The Director,
State Urban Development Agency,
Health Wing, "ILGUS BHAVAN"
Salt Lake, Sector-III
Kolkata-'91

AD(H)
9/10

**Sub: Requisition of Fund for the period October
to December 2007 for community based primary
Health Care Services**

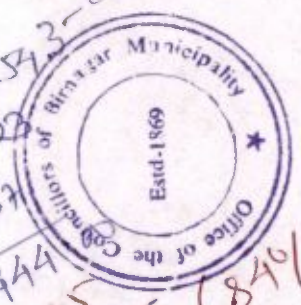
Sir,

We are enclosing herewith the requisition of Fund for the period from October 2007 to December 2007 in the prescribed proforma for your consideration.
Thanking you,

Fund released = 7.32 lacs.

Yours faithfully,

upto June 182259.3 - check
Aug. 183022
Sept. 81167



449444
165845
615289 (84%)

Water supply amount 508 dt. 11.10.07

Till Sept A/E is 61%
So, no fund can be released

8.10.07
Chairman
Birnagar Municipality

Oct -
TOMA

BIRNAGAR MUNICIPALITY

Requisition of fund for the period October to December 2007

SI no.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	
1	Equipment	
2	Furniture	
3	Construction	
	(Not applicable for present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
4	I.E.C. & Materials	
5	Renovation works	
6	Base Line survey	
7	Family Schedule, Training manual, HMIS format & HHW Kit	
8	Strengthening of existing Maternity Home & Dispensaries	
	(Not applicable for present)	
	Recurring	
9	Honorarium	42,000/- ✓
10	Salaries	76,500/- ✓
11	Rent	
12	Training	
13	Drug	72,000/- ✓
14	I.E.C.	
15	Operating cost (sundries, printing postage & telephone, TA /DA etc.	13,500/- ✓
	Total	2,04,000/-



Rs. 2.04 lakhs
may be released

2.10.07
 Chairman
 Birnagar Municipality



No.03473260227

Fax No.03473260227

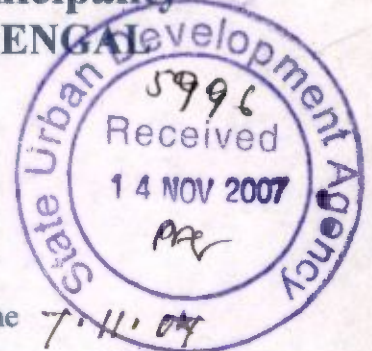
E-Mail: birnagar.2007 @ Yahoo.co.in.

Office of the Councillors of Birnagar Municipality
P.O. BIRNAGAR, DIST. NADIA. WEST BENGAL

From:

Sri Nanda Dulal Roy
Chairman, Birnagar Municipality
Sri Partha Kumar Chatterjee
Vice-Chairman, Birnagar Municipality.

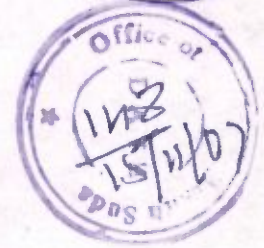
AM (H)
15/11/07



Memo No. 1099

Dated Birnagar the 7.11.07

To,
The Director,
State Urban Development Agency,
Health Wing, ILGUS BHAVAN,
Salt Lake, Kolkata: '106



Sub: Requisition of fund for the period October 2007 to December 2007.

Ref. No. : Your memo No. SUDA/Health /63 ULBs/Accts/07/508
dated 11-10-2007.

Sir,

Enclosing herewith p-lease find the statement of Expenditure up to October '07. It may be seen that 84.05% of total fund allotted has been spent for the subject purpose.

We are enclosing herewith requisition of fund for the period October to December 2007 with the request you kindly to arrange to allot further fund at an early date.

Thanking you,

Yours faithfully,

[Signature] 07.11.07

Chairman
Birnagar Municipality

Encl: As stated above.

BIRNAGAR MUNICIPALITY

Requisition of fund for the period October to December 2007

Sl no.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	
1	Equipment	
2	Furniture	
3	Construction	
	(Not applicable for present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
4	I.E.C. & Materials	
5	Renovation works	
6	Base Line survey	
7	Family Schedule, Training manual, HMIS format & HHW Kit	
8	Strengthening of existing Maternity Home & Dispensaries	
	(Not applicable for present)	
	Recurring	
9	Honorarium	42,000/-
10	Salaries	76,500/-
11	Rent	
12	Training	
13	Drug	72,000/-
14	I.E.C.	
15	Operating cost (sundries, printing postage & telephone, TA /DA etc.	13,500/-
	Total	2,04,000/-



[Handwritten Signature] 07.11.07

Signature of Chairman
Birnagar Municipality
Chairman
Birnagar Municipality

P

OFFICE OF THE COUNCILLOR ASHOKE NAGAR KALYANGARH MUNICIPALITY

P.O. & P.S. Ashokenagar, North 24 parganas. Phone : (03216) 221454
[Estd - 1968]

Ref. No. 955/25A-4/19/06

Date. 29/10/2007

To
The Director,
SUDA,
Health Wings,
H.CUS Haveli,
H-C Block, Sector-III,
Bidhannagar, Kolkata-91.

PO(H)
30/10



Sub :- Adjustment for Community Based Health Programme of Ashokenagar-Kalyangarh Municipality for the period of 2006-07 2006-07 & 2007-08 Rs. 3,03,000.00 D.D. No. 319908 dt 14.9.2006. Our Received Dt. 27.02.2007.

Sl No.	Item of Expenditure.(Non-Recurring)	Expenditure Amount.
1	Equipments (for training material)	Rs. 16,700.00
2	Renovation of works (Bath + Lat construction for training)	Rs. 23,584.00
3	Furniture	Rs. 31,506.00
4	Operating Cost.	Rs. 24,438.00
5	HHW's Tea & Tiffin for 45 days (34 heads) @ 30/-	Rs. 72,900.00
6	HHW's Mobility Support for 45 days training (34 heads @ Rs 20/-	Rs. 48,600.00
7	Trainers fee for Two Doctors @ Rs. 100/- Rs. Per hour (168 hours)	Rs. 16,800.00
8	HHW's Honorarium for the month of July, August & September 2007. (for 37 heads @ 1000/-per month & per head.	Rs. 1,11,000.00
TOTAL=		Rs. 3,45,028.00

(Rs. Three lacs forty five thousand and twenty eight) only

Letter 188 no
WDC no 523 dt.
2.11.07

Sarmista Dutta
(Sarmista Dutta)
Chairman.

Ashokenagar-Kalyangarh Municipality.

Adjustment for Community Based Health Programme

N.B. papers of Expenditures Bills and vouchers and will be furnished
Letter on.

Fund returned - 303000.00
SOE submitted - 340028.00

ASHOKENAGAR-KALYANGARH MUNICIPALITY
P.O. ASHOKENAGAR, DIST. NORTH 24-PARGANAS
PIN-743222

Ref. 843/A / 2SA-4/2007

To
The director,
SUDA,
ILGUS Bhavan,
Salt lake City,
Kolkata-

Madam,

I am submitting the requisition as per proforma, enclosed
herewith, for sanction of fund.

Yours faithfully,

Sarmistha Dutta
(Sarmistha Dutta)

Chairman,

Ashokenagar-Kalyangarh Municipality.

Sarmistha Dutta
Chairman

Ashokenagar-Kalyangarh Municipality

*SOE not yet submitted for the
fund earlier return*

S



*PO (H)
4/10*

*Letter and memo No. 497
dt. 03.10.07*



OFFICE OF THE COUNCILLOR ASHOKE NAGAR KALYANGARH MUNICIPALITY

P.O. & P.S. Ashokenagar, North 24 parganas. Phone : (03216) 221454
[Estd - 1968]

Ref. No...../25A-4/2006

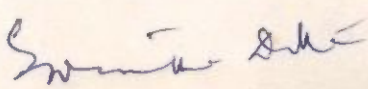
Date..... 22.09.07

Requisition of fund for the period 1st April 07 to June 2007 Oct - to Dec 07

Sl. No	Item of Expenditure	Expenditure (Amount Rs.)	Sl. No	Item of Expenditure	Expenditure (Amount Rs.)
1	Equipment 1. Com. Pinter & Fax 2. Xerox Machine	1,20,000 3,50,000 X	9	Honorarium	1,11,000
2	Furniture	2,40,000 1,60,000	10	Salaries	
3	Construction; (Not applicable for the present)		11	Rent	24,000
	a. Sub-Centre		12	Training	
	b. OPD cum maternity Home.		13	Drug	3,90,000
	c. OPD		14	I.E.C.	3,84,000
4	I.E.C. & Materials		15	Operating cost (Sundries, printing, postage & Telephone, TA/DA etc.)	60,000
5	Renovation Works X	1,40,000			45,000
6	Base Line Survey X	80,000			
7	Family Schedule Training manual, HMS format & HHW Kit X	20,000			
8	Strengthening of existing maternity Home & Dispensaries (Not applicable for the present)				
TOTAL					15,35,000

96000-X8
2
=

8,44,000


Signature of Chairman/ Vice-Chairman

Sarmista Dutta
Chairman
Ashokenagar-Kalyangarh Municipality

Requisition of fund for the period

As - 8.44 Lacs
will be released

&

OFFICE OF THE COUNCILLOR
ASHOKE NAGAR KALYANGARH MUNICIPALITY
P.O. & P.S. Ashokenagar, North 24 parganas. Phone : (03216) 221454
[Estd - 1968]

Ref. No. *Akn/1004/2574/06*Date *14/11/07*

To
The Director,
SUDA, HEALTH WINGS,
ILGUS BHAVAN,
H-C Block, Sector-III,
Kolkata-91.



Sub:- Regarding fund requisition for Community Based Primary Health Care.

Sir,

I am to state the municipality has sent you adjustment for Community Based Primary Health Programme of the municipality on 29.10.2007 by a Fax on the date.

However you have sent above mentioned communication received at this end on 08.11.2007.

I further request you to expedite the placement of fund immediately.

Yours faithfully,

Sarmishta Dutta
(Sarmishta Dutta)

Chairman,
Ashokenagar-Kalyangarh Municipality.

Office of the Councillor

MATHABHANGA MUNICIPALITY

Mathabhanga * Cooch-Bihar

(WEST BENGAL)

Memo No M.M/Health/1346/07

From :-
The Chairman
Mathabhanga Municipality.

To,
The Director,
SUDA (Health Wing)
ILGUS BHAVAN, Bidhan Nagar,
Kolkata - 91



Sub:- Requirement of fund under SUDA.

Dear Sir,

I have to draw your kind attention to the fact that an amount of Rs. 2,13,000=00 (Two Lakhs Thirteen thousand Only) has been received under Draft No. 320221 Dt. 03-10-06 by the Mathabhanga Municipality for the C.B.P.H.C.S. Purpose from your end: In this connection it may be stated that 93% approx of the said amount has been exhausted at the present.

Under the circumstances I fervently request you kindly to arrange further allotment of fund in favour of the chairman Mathabhanga Municipality at an early date.

An early action is solicited.

Thanking you,

Yours faithfully,

(Signature)
16/10/07

V. Chairman
Mathabhanga Municipality
Mathabhanga Cooch Behar

Letter is in side no. 520 dt. 2.11.07.

chkm

Office Phone No : 03583
255255
Fax : 255194

Office of the Councillor

MATHABHANGA MUNICIPALITY

MATHABHANGA * COOCHBEHAR

(West Bengal)

Memo. No. MM/Health/1582/07

Date 14.09.2007

From:

The Chairman
Mathabhanga Municipality
Mathabhanga, Cooch Behar

To,

The Director,
SUDA(Health wing)
ILGUS BHAVAN, Bidhan Nagar
Kolkata- 91.



20 SEP 2007

PO(H)
19/9

Sub:- Requisition of Fund

Sir,

The undersigned is pleased to submit for Requisition of fund for three months for the Period from September 07 to November 07 along with prescribed format enclosed herewith.

In this connection he/she is requested to take necessary measure and do the needful.

Yours faithfully

Chairman
14/9/07

Mathabhanga Municipality

Fund Released - 2.13 lakhs
Apr June - 5,503.00 (checked)
July - 61,917.00
Aug - 61,280.00
129,200.00

(60.66%)
Sept. + 12,000.00
141,200.00

(66.29%)
Oct. + 51,170.00
192,370.00

Letter issued
492 dt 29.9.07

(904)

Mathabhanga Municipality
Community Based Primary Health Care Services
Submission of Requisition of Fund

Requisition of fund for 3 months is to be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

Requisition of fund for the period ...Sept.07.....to...Nov,2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non-Recurring		
1.	Equipment	50,000.00
2.	Furniture	1,00,000.00(Sub. centre & M & S Cell)
3.	Construction:(Not applicable for the present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
Recurring		
9.	Honorarium	36,000.00
10.	Salaries	60,000.00
11.	Rent	
12.	Training	
13.	Drug	
14.	I.E.C.	
15.	Operating Cost (Sundries, printing, postage & telephone, TA/DA etc.	5,000.00
TOTAL		2,51,000.00

*As. 2.51 lakhs
my bc zulema*

12/9/07
 Signature of Chairman/ Vice-Chairman
 Mathabhanga Municipality
 Mathabhanga, Coochbehar

255268/255300

Fax 03465255300

OFFICE OF THE

NALHATI MUNICIPALITY

Nalhati ✪ Birbhum

To *Memo no - 815/nal/muni*
The Director Of SUDA
Govt. of West Bengal,
"Health Wing" "ILGUS BHAVAN"
H.C.Block, SectorIII, Bidhannagar, Kolkata-91.



dt-13.9.07

Sub:- Report on Statement of Expenditure and U.C. including Requisition of fund for Nalhati Municipality, Birbhum.

Reference:- your memo no. SUDA- Health/ 63 ULBS / Accts. / 07/366 dated 17/08/2007.

Sir,
Reference above. The desired Proforma report regarding Guideline on S.O.E., UC and requisition of Fund under Nalhati Municipality is being submitted herewith for favour of kind information and taking necessary action.

Enclosed:- 10 sheets only

*Fund released 2.27 lacs.
SOE submitted 209958.00 (92.4%)
Rs. 3.84 lacs released*

Yours faithfully

B. Jha
(B. Jha) 13.9.07
Chairman

Nalhati Municipality

Training at ULB Level

The components of Training at ULB level are as under :

i) Sensitization of stakeholders

- 2 (two) such sessions for each ULB in a year
- Any expenditure for the purpose will be on actual basis.
- Fund had already been provided to the ULBs in the initial installment.

ii) Training of HHWS & panel candidates for 45 days

- Cost estimate :

- Cost of training materials (suitable folder / bag, exercise book, pen, pencil, eraser, sharpener, scale - 1 each) per HHWS & panel candidates and other functionaries - not exceeding Rs. 300/-.
 - Tea & tiffin @ Rs. 30/- per head per day for total participation as above.
 - Mobility support @ Rs. 20/- only per HHW & panel candidate trainees per day.
 - Trainers fees @ Rs. 200/- per trainer for 2 hours session.
 - Contingency not exceeding 10% of the total expenditure.
- Details have already been indicated in letter to the Chairman concerned in connection with training programme of HHWS.

iii) Local training (orientation / re-orientation) for Medical professionals, FTS and Paramedics

- Details will be intimated to the ULB, in due course.

iv) Procurement of equipment and furniture for training - to be procured by ULB

- List enclosed at Annexure - V
- Estimated cost Rs. 50,000/- per ULB.

//

//

NALHATI MUNICIPALITY

Nalhati ★ Birbhum

COMMUNITY BASED PRIMARY HEALTH CARE SERVICES

Requisition of fund for the period from Aug. 2007 to Sep. 2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	<u>Non-Recurring</u>	
1.	Equipment 4 Sub-centre @ Rs. 25000/- each.	100000=00
2.	Furniture 4 Sub - centre @ Rs. 20000/- each.	80000=00
3.	Construction : (Not applicable for the present) a) Sub-Centre b) OPD cum Maternity Home c) OPD	
4.	I.E.C & Materials	
5.	Renovation Works	
6.	Base Line Survey	
7.	Family Schedule, Training manual, HMAS format & HHW Kit bag.	
	<u>Recurring</u>	
9.	Honorarium	
10.	Salaries	
11.	Rent 4 Sub-centre @ Rs.1000/- P.M. each for one year	48000=00 12000=00
12.	Training	
13.	Drugs 4 Sub-centre @ Rs. 96000/- each	384000=00 192000=00
14.	I.E.C. Operating Cost (Sundries, Printing, Postage & Telephone, TA/DA etc.)	
	TOTAL	612000=00

Rs. 3,84,000/- (Three Lakhs Eighty Four Thousand only)

Signature of Chairman/Vice-Chairman

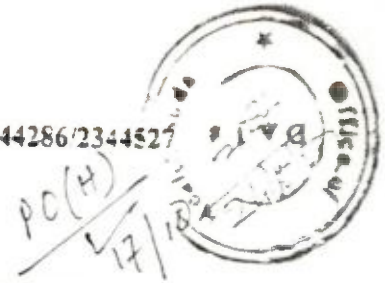
Chairman, 13.9.07

Nalhati Municipality

Estd:1879

Ph: 2344286/2344527

OFFICE OF THE COUNCILLORS OF
KURSEONG MUNICIPALITY
KURSEONG



Memo No. 912/1/6.10.07

Dated the 17th October 2007

From
Shri Sanjay Chettri,
Vice-Chairman,
Kurseong Municipality,
Kurseong.

To
✓ The Director, SUDA
ILGUS Bhawan,
H.C. Block, Sector-III,
Bidhannagar, Kolkata-91

Sub: Submission of Utilisation Certificate of HHW

Sir,

Enclosed please find the Utilisation Certificate of HHW amounting to Rs. 1,52,916.00 sanctioned to Kurseong Municipality vide G.O. No: SUDA-Health/63ULBs/07/323 dt. 13.08.07 out of this fund the Municipality has Utilised a sum of Rs. 60,520.00.

Please release further grant urgently as this Municipality has to pay a monthly Salary to the Health Workers and Salary of Health Doctor & also to meet other expenditure.

Yours faithfully,

Chairman,
Kurseong Municipality

Encl: Statement of Expenditure
Form of Utilization
Duplicated Voucher

Memo No. 912/1/6.10.07

Dated the 17th October 2007

Copy forwarded for kind information:

1. The Director of Local Bodies, Purta Bhawan (1st Floor)
Bidhannagar, Salt Lake City, Kolkata
2. Shri S.K. Bhowmik, Joint Secretary, Govt. of W.B.
Municipal Affairs Deptt. Writers' Building
Kolkata
3. Dr. S. Goswami, Project Director,
Health Wing, SUDA, Salt Lake, Kolkata

Rs. 1.79 lakhs
de utilcom
Goswami

Chairman,
Kurseong Municipality

KURSEONG MUNICIPALITY
KURSEONG

Requisition of fund for the period from 01.10.2007 to 31.12.2007:

Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Items of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1.	Equipment	-	9.	Honorarium (24560x(24) x3) =	73,680.00
2.	Furniture	-	10.	Salaries (5,000x(4) x3) =	60,000.00
				Salary (5,000x(1)x3) =	18,000.00
3.	Construction (not applicable for the present)	-	11.	Rent of Center (1,000x (4) x3) =	12,000.00
	a) Sub-Center	-	12.	Training/Tiffin Allowance	-
	b) OPD cum Maternity Home	-	13.	Drug	-
	c) OPD	-	14.	LEC	-
4.	I.E.C & Materials	-	15.	Operating Cost (Supplies, Printing, Postage & telephone, TA/DA etc)	10,000.00
5.	Renovation Works	-	16.	Trainees'	-
6.	Base Line Survey	-	17.	Contingency	5,000.00
7.	Family Schedules, Training manual, HMS format & HHW kit	-			
8.	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	-			
	Total:			Total:	1,78,680.00

172000/-

 Chairman,
 Kurseong Municipality

Fund released = Rs. 3.95 lakhs

So far Received / upto June, 07 = 2,04,697/- (checked)

July, 07 = 20,000/-

Aug., 07 = 19,880/-

Sept. 07 = 60,520/-

3,05,097/- (77.23%)



**OFFICE OF THE
COUNCILLORS OF KHARAR MUNICIPALITY**

P.O. - KHARAR, DIST. - PASCHIM MEDINIPUR

From : CHAIRMAN,
KHARAR MUNICIPALITY,

Ref. No. 2105.....

PO(H)

Dated 12.10.2007...

To
The Director, SUDA
Health Wing
ILGUS BHAVAN, HC Block, Sector -III
Bidhannagar, Kol-700091



Sub: Requisition of Fund for the period 1.10.07 to 31.12.07

Madam,

I am to submit herewith the requirement of fund for three months for H.H.W. Scheme. The S.O.E. has already been submitted to you Vide Memo No - 2041 dt.-19.09.07. The balance amount is Rs.700.00, so I therefore request you to allot the fund of Rs. 6, 09,500.00 as early as possible, so that payment to H.H.W. workers for the month of September can be done before Durga Puja.

*Rs. 6.09 lakhs.
may be released.*



*Fund released 2.05 lakhs
S.O.E received Rs. 2,04,300/-
(99.65%)*

Yours faithfully

Ahosh 12/10/07
Chairman
Kharrar Municipality

Chairman
Kharrar Municipality

Requisition of fund for the period ...1.10.07.... to .31.12....., 2007

SLNo.	Items of Expenditure	Expenditure (Amount in Rs.)
1	Equipment 2*25000.00 for two sub-centre Computers and Others - 1,30,000.00	1,80,000.00
2	Furniture 2*20,000.00 for two sub-centre Others furniture- 40,000.00	80,000.00
3	Construction (Not applicable for the present)	
	a) Sub-Centre	
	b) POD cum Maternity Home	
	c) OPD	
4	I.E.C. Materials	
5	Renovation of Works	
6	Base Line Survey	
7	Family Schedule, Tanning manual, HMIS format & HHW kit	
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	
9	Honorium 10*1000.00*3	30,000.00
10	Salaries 25,500.00*3	76,500.00
11	Rent 2*1000.00*3	6,000.00
12	Tanning	
13	Drug 96,000.00*3	1,92,000.00
14	I.E.C	
15	Operating Cost (Sundries, printing, Postage & telephone, TA / DA etc.) 15,000.00*3	45,000.00
	Total	6,09,500.00



Ahosh 12/10/07
 Chairman
 Kharar Municipality
 Chairman
 Kharar Municipality

Phone-2250825/942
STD Code-0342

OFFICE OF THE MUNICIPAL COUNCILLORS, MEMARI

P.O.-MEMARI :: DIST. BURDWAN

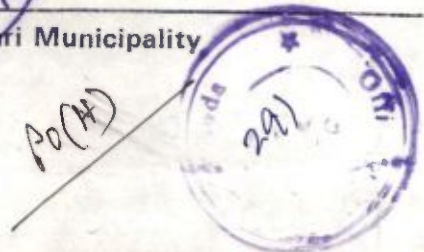
Memo No.- 850/3/3
From Sri Avijit Konar



Date 15/10/08

Chairman / Vice-Chairman / Councillor, Memari Municipality

To
The Director,
SUDA (Health wing),
'ILGUS BHAVAN' H.C. Block, Sector-III,
Bidhannagar, Kolkata-91.



Sub:- Submission of Requisition of Fund under Community Based Health Care Service.

Sir,

With reference to your letter No. SUDA-Health/63 ULBs/Accts/07 309 dt.17.8.07, I am to send herewith the prescribed format of requisition of fund duly filled up from our end for continuation of community based health care service. This is for your kind information and taking necessary action please.

Thanking you,

Yours faithfully,

[Signature]
Vice-Chairman
Memari Municipality

Fund released Rs. 2.27 lakhs

SOB received (upto Mar, 07) = 87,970/- (checked)
Sept. 07 = 82,200/-

170,170/-

(74.96%)

Rs. 4.68 lakhs
to be released.

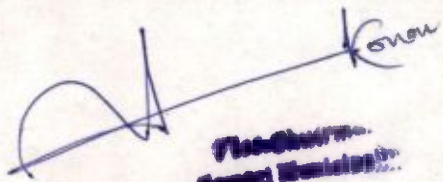
Submission of Requisition of Fund

Requisition of fund for 3 months is to be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

Requisition of fund for the period ... *October* ... to ... *December* ..., 2007

Sl. No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1.	Equipment	1, 00,000 = 00
2.	Furniture	2, 50, 000 = 00
3.	Construction : (Not applicable for the present)	—
	a) Sub-Centre	—
	b) OPD cum Maternity Home	—
	c) OPD	—
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 (Not applicable for the present)	—
Recurring		
9.	Honorarium	48, 000 = 00
10.	Salaries	50, 000 = 00
11.	Rent	—
12.	Training	—
13.	Drug	—
14.	I.E.C.	—
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	20, 000 = 00
TOTAL		1, 68, 000 = 00

Signature of Chairman / Vice-Chairman


Chairman
Health Services



Office of the Councillors
Contai Municipality

S.T.D. 03220
 255017.255027
 257377.255312
 257078
 FAX: 255599

P.O. - Contai * Dist - Purba Medinipur

No. CM.733/2008 E

Date 13.10.07

From : Chairman / Vice-Chairman / Councillor / Executive Officer / Contai Municipality

To,
 The Director,
 State Urban Development Agency,
 ILGUS BHAVAN,
 HC-Block, Sector-III,
 Bidhannagar, Kolkata- 700091.



Sub :- Submission of SOE for the period 13.09.'07 to 12.10.'07 for Rs. -76,620.00, utilization certificate for 2nd quarter of '07-'08 & Requisition of fund of Rs. 3,06,847.00.

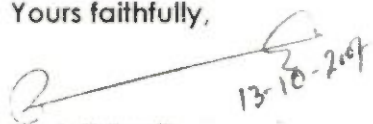
Sir / Madam,

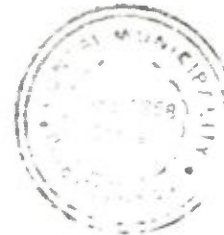
I am submitting herewith the SOE & Utilization Certificate and requisition of fund of HHWS Account under CBPHCS for your kind information and taking further action.

Hence, I would request you to release further grant for purchasing the furniture and equipments and drugs etc. of Sub- Centers at your earliest for the expedite for execute the said programme.


Thanking you.

Yours faithfully,


 (S. Adhikari),
 Chairman,
 Contai Municipality.



Enclose :- As stated.

Rs. 4.46 lacs
 to be released.


OFFICE OF THE COUNCILLORS', CONTAI MUNICIPALITY,

Contai :: Purba Medinipur.

Requisition of fund for the period Oct.'07 to Dec.' 07

Sl.No	Item of expenditure	Expenditure (Amount in Rs.)
1	Equipment:	
	a) for Training	
	b) Management & Supervision Cell (Sub-Centre) 5 Nos. (1,25,000/- - 90,000)	35,000.00
2	Furniture: (Sub Centre)	1,00,000.00
	a) for Training (due)	
	b) for Management & Supervision Cell (due)	
3	construction:(Not applicable for the present)	
	a)Sub-Centre	
	b)OPD cum Maternity Home	
	c)OPD	
4	LEC & Materials	
5	Renovation Works	
6	Base Line Survey	
7	Family Schedule, Training Manual,HMS format& HHW Kit.	
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present.	
9	Honorarium	78,000.00
10	Salaries	78,000.00
11	Rent(Sub-centre)	15,000.00
12	Training	
13	Drug.	1,20,000.00
14	LEC	
15	Operating cost(Sundries,printing,postage&Tele Phone,T.A/D.A etc.)	20,000.00
	Total Rs.-	4,46,000.00



Chairman 13-10-2007
 Contai Municipality
 Chairman,
 Contai Municipality

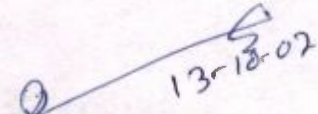
Fund released 7,07,500/-
 SOE received upto July - 4,39,020/- — checked
 10.8.07 to 12.10.07
 52,707/-
 76,620/-
5,68,347

(80.33%)

Statement of Demand

Grant Received	Total Grant Received	Total SOE upto 12.10.07	Banalce Amount (Rs.)	Requisition of Fund for period Oct.'07 to Dec.'07	Total Demand
Rs.264000.00 (Vide memo No. SUDA/ Health /63ULBs/06/154 Dt.- 26.10.06 against draft no.- 320673 dt/- 23.10.06 SBI, Contai.	7,07,500.00	5,68,347.00	1,39,153.00	4,46,000.00	3,06,847.00
Rs. 4,43,500.00 (Vide memo No. SUDA/ Health /63ULBs/07/220 Dt.- 06.07.07 .		(80/.)			




Chairman,
Contai Municipality
 Chairman,
 Contai Municipality

13-12-07

PANSKURA MUNICIPALITY

ESTD. 2002
P.O. PANSKURA

STD : 01228
Phone : 252312
Fax : 252005

Dist.—PURBA MEDINIPUR, Pin-721139

পাঁশকুড়া পৌরসভা

পোঃ—পাঁশকুড়া • জেলা—পূর্ব মেদিনীপুর

Memo No. : PM/PHC/259/2006/5370

To
The Director, SUDA
Health Wing
ILGUS Bhawan,
Kol-91.

Dated : 06/10/07

PD(H)
1/10



Sub :: Statement of Expenditure (SOE) and Status Report in continuation with Community Based Primary Health Care Service in 63 Non-KMA ULBs for the month of Sep'07 of Panskura Municipality.

Dear sir,

I am to send herewith the monthly statement of Expenditure (SOE) for the month of Sep'07 in the Prescribed Format along with the Status Report of fund allotment in the prescribed format for the month of Sep'07 of this Municipality in continuation with Community Based Primary Health Care Service in 63 Non-KMA ULBs.

2. The amount has not been preferred earlier.

Thanking you,

Yours faithfully,

Abhan
Chairman,
Panskura Municipality

Full Demand 2.30 lakhs
So submitted 90,680.00 (with June, 07) - checked
15,351.00 - Aug, 07
65,959.00 - Sept, 07
1,71,990.00 (74.71%)

Rs. 7.07 lakhs
be released.

PANSKURA MUNICIPALTY
PANSKURA :: PURBA MEDINIPUR

Submission of Requisition of Fund

Requisition of fund for the period October to December 2007

Sl. No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1	Equipment (including 2 Computers)	1,90,000 = w
2	Furniture	1,20,650 = w
3	Construction : (Not applicable for the present)	—
	a) Sub-Centre	—
	b) OPD cum Maternity Home	—
	c) OPD	—
4	I.E.C & Materials	30,000 = w
5	Renovation Works	3,82,278.57
6	Base Line Survey	40,000 = w
7	Family Chedule, Training manual, HMIS format & HHW kit bag	10,000 = w
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	—
Recurring		
9	Honorarium	51,000 = w
10	Salaries	94,500 = w
11	Rent	6000 = w
12	Training	20,000 = w
13	Drug	1,96,000 = w
14	I.E.U.	—
15	Operating cost (Sundries, printing, postage & telephone, TA / DA etc)	30,000 = w
	Total Rs	19,70,428.57

Rupers Eleven Lakh Seventy thousand four hundred twenty eight and fifty seven pices.

A. B. Han
Chairman / Vice Chairman,
Panskura Municipality
Panskura Municipality

Office Of the Councillors

JHARGRAM MUNICIPALITY



Phone – (03221) 255021

Telefax – (03221) 255098

Jhargram, Paschim Medinipur

01 SEP 2007

No: - 1087/6PH -24

Dated: 21.09.2007

To,
The Director
SUDA , HEALTH WING,
ILGUS BHAVAN
HC BLOCK, Sector- III
Bidhan Nagar
Kolkata – 700091,



Sub: Requisition of Fund for the month of Sep to Nov 2007 under SUDA Health Wing

Sir,
As per your guideline for requisition of fund for the above said month is sent for your kind approval.
Your early action to the matter is highly solicited.

Thanking you

Yours Faithfully

P. Sama
Chairman
Jhargram Municipality

Chairman
Jhargram Municipality

Encl. Above.

Fund released
SOI submitted

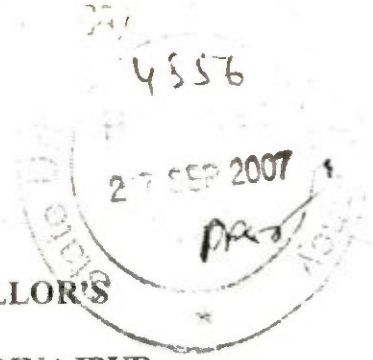
2.33 lacs.
177547.00 (76.2%)

Requisition of Fund

Requisition of Fund for the Period **September to November 2007**

SINO	Items	Requisitioned (Amount in Rs.)
	Non-Recurring	
1	Equipment	220000.00
2	Furniture	80000.00 ✓ - 80,000
3	Construction (Not applicable for the present)	
	a) Sub- Centre	
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
	Recurring	
9	Honorarium	54000.00 ✓ 54000
10	Salaries	94500.00 63000
11	Rent	
12	Training	
13	Drug	
14	I.E.C	
15	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	45000.00 36,000
	TOTAL	493500.00 2,33,000

Bama
Chairman
Jhargram Municipality



OFFICE OF THE BOARD OF COUNCILLOR'S
KALIYAGANJ MUNICIPALITY
KALIYAGANJ (733129): : : DIST. UTTAR DINAJPUR

Memo No.1542/HHW/07

Date.22.09.2007

To,

The Director
SUDA
Illgus Bhawan
Sector- III
Bidhan Nagar.
Kolkata-700091

Sub :- Submission of SOE, UC. In favour of Kaliyaganj Municipality.

Ref:-SUDA-Health/63ULBs/Accts./07/391 dated-17.08.2007.

Madam,

With reference to the above. I am enclosing herewith the SOE and U.C. in favour of Kaliyaganj municipality for your kind information and necessary action please.

Yours faithfully,

A.K.De.Sarkar
22.9.07.
(A.K.De.Sarkar)
Chairman
Kaliyaganj Municipality

Encl:

- 1) Utilisation Certificate
(form No. S.R.330A)-1
- 2) Monthly Summary Sheet
from April'07 to August'07-6
- 3) Requisition of Fund
Oct'07 to Dec'07-1
- 4) Voucher SI No.1 to 13 in
Duplicate

CF
$$\begin{array}{r} 23363 \\ 242050 \\ \hline 265363 \end{array}$$

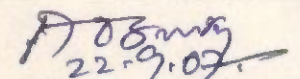
Fund Released. 4.72 lakhs
SOE Submitted = ₹,06,637.00 (checked)
Apr. to sep,07 = ₹,48,169.00
$$\frac{4,54,806.00}{(96.35\%)}$$

Submission of Requisition of Fund

Requisition of fund for 3 months is to be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

Requisition of fund for the period October..... to December....., 2007

Sl. No.	Items	Requisitioned Amount in Rs.
	Non-Recurring	
1.	Equipment $25,000 \times 4$	1,00,000
2.	Furniture $20,000 \times 4$	80,000
3.	Construction : (Not applicable for the present)	
	a) Sub-Centre $45,000 \times 4$	1,80,000
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
	Recurring	
9.	Honorarium $21,000 \times 3$ for supervisor $11,700 \times 3 \times 4$	65,040
10.	Salaries $31,500 \times 3$	94,500
11.	Rent $1,000 \times 4 \times 3$	12,000
12.	Training	1,00,000 6,000
13.	Drug	1,00,000
14.	I.E.C.	
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.) $15,000 \times 3$	45,000
	TOTAL	7,76,540


 Signature of Chairman / Vice Chairman

Chairman
Kaliyaganj Municipality
Kaliyaganj, U. Dinalpur

5.02 lakhs.
 may be retained

Community Based Primary Health Care Services in 63 Non-KMA ULPs

Guideline on SOE, UC and Requisition of Fund

Submission of Statement of Expenditure (SOE)

- SOE is to be submitted to this office by 10th of the following month which will include
 - a) Forwarding letter by Chairperson / Vice-Chairperson addressed to the Director, SUDA.
 - b) Status of fund received & SOE submitted at Annexure - I.
 - c) Monthly summary sheet on SOE at Annexure - II.
 - d) Voucher details Statement at Annexure - III.
 - e) Xerox copy of vouchers relating to vouchers details statement duly authenticated by either Chairperson or Vice-Chairperson of the Municipality.
- Pay order for each type of expenditure is to be given either by the Chairperson or Vice-Chairperson of the municipality concerned.

Passed for Payment of Rs. 2,40,519.....
(Rupees TWO LACK FORTY THOUSAND FIVE HUNDRED
ONLY.....)
Only to be debited to 24844.....

A. D. B. B. B.
22-9-07
Chairman / Vice-Chairman
Chairman

Kaliyaganj Municipality
Kaliyaganj, U. Dinajpur

- Revenue stamp for the payment exceeding Rs. 5,000/- (Rupees five thousand) only is to be affixed in the Bill / Receipt.
- Advance payment should not be treated as expenditure. In such cases, final adjustment vouchers will be treated as expenditure and included in SOE.
- Stock certificate is to be endorsed on the procurement bill (i.e. Entered in Assets / Stock Register at Page No. Under Serial No.)
- Gross Expenditure (including P. Tax, I. Tax, Security Deposit etc.) is to be booked and shown on SOE.

Memo No. 446 / H.W. - 01/07 21, 18.09.07



Submission of Requisition of Fund

Requisition of fund for 3 months is to be submitted by the Chairperson / Vice-Chairperson to Director SUDA as per format along with a forwarding letter.

Requisition of fund for the period July 2007 to September, 2007

EGRA MUNICIPALITY

Sl. No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1.	Equipment (computer Assembling-2 nos. & Fax-Machine)	1,20,000/-
2.	Furniture	—
3.	Construction : (Not applicable for the present)	
	a) Sub-Centre	—
	b) OPD cum Maternity Home	—
	c) OPD	—
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 (Not applicable for the present)	—
Recurring		
9.	Honorarium	38,388/-
10.	Salaries	76500 / - 1,00,500/-
11.	Rent	3,000/-
12.	Training	4,500/-
13.	Drug	72,000/-
14.	I.E.C.	5,000/-
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	6,612/-
TOTAL		Rs. 3,50,000 = 00

Signature of Chairman / Vice-Chairman
 Vice-Chairman,
 EGRA MUNICIPALITY
 Eggra Purb Medinipur

Fund released 2/19 lakh
 SOE submitted - 1,55,888/-
 (with July, 07)

Pr. 3.26 lakhs
 Mrs. G. C. Dew

70.26% SOE submitted



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
"ILGUS BHAVAN", HC Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং

SUDA-67/2006/ 1298

তারিখ 25.09.2007

From : Director, SUDA

To : The Treasury Officer
Bidhannagar Treasury

Sub: Submission of cheque for enfacement

L.F. A/c. NO. 002008

Sir,

Enclosed please find 5 cheques in favour of SUDA - A&OE Scheme.

Sl. No.	Name of Payee	Cheque No.	Cheque Date	Amount (Rs.)
1.	Chairman, Gushkara Municipality	D 004768	22.09.07	330000.00
2.	Chairman, Joynagar Mazilpur Municipality	D 004769	22.09.07	523000.00
3.	Chairman, Khirpai Municipality	D 004770	22.09.07	158000.00
4.	Chairman, Chandrakona Municipality	D 004771	22.09.07	156000.00
5.	Chairman, Beldanga Municipality	D 004772	22.09.07	462000.00
Total				1629000.00

The above funds are required for immediate disbursement.

I would request you to enface the aforesaid cheque at an early date.

Encl: Five Cheque.

Yours faithfully,

Director, SUDA

দুরত্বি : ২৩৫৮ ৬৪০৩/৫৭৬৭, ২৩৩৪-১০০৬, ফা.নং : ২৩৫৮ ৫৮০০

Tel : 2358-640 707, 2334-1006, Fax : 2358-5800, E-mail : dirsudawb@yahoo.com

BELDANGA MUNICIPALITY

ESTD - 1981

P. O. BELDANGA, DT. MURSHIDABAD (W.B.) PIN-742133

S.T D : 03482

Phone : Off. 264113

2nd No. Resi. 264090

3rd No. Resi. 264322

Ref. No. 1174/III-9(S)/07/En

Dated 18.09.07

To,
The Director
(Health Wings)
SUDA
II-GUS Bahadur
Bidhanagar
Sector - III
KOL - 91

Sub: Requisition of fund of
C.B.P.H.S Scheme.

Sir/Madam

I am sending herewith a requisition of fund regarding Communiti Based Primary Health Care Service for the month of July to Sept. 2007. for your information and necessary action taken please.

Thanking you,

Yours faithfully

18.9.07

Chairman

Beldanga Municipality

Chairman

Beldanga Municipality

Requisition of fund for the period July to September 2007

Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)	SL No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non Recurring					
1.	Equipment (including sub centre equipment)	75000.00	9.	Honarium	42000.00
2.	Furniture (including sub centre furniture)	75000.00	10.	Salaries	31000.00
3.	Construction (Not applicable for the present)		11.	Ret.	9000.00
	a) Sub-Centre.		12.	Training	40000.00
	b) OPD Com maternity home.		13.	Drug.	100000.00
	c) OPD.		14.	I.E.C	
4.	I.E.C and materials.		15.	Operating cost (Sundries, Printing Postage & telephone I/DA etc.	30000.00
5.	Renovation on works.				
6.	Base Line Survey.				462000.00
7.	Family schedule, training manual, HMS format and H/W Kit				
8.	Strengthening of existing Maternity Home & Dispensaries (Not applicable for the present)				

Total (1 to 15)

Handwritten notes and signatures:

Handwritten: Total released 2-13 Lakhs (8.55.11.11)

Handwritten: For submitted 18/9/07

Handwritten: 19/9/07

Handwritten: 11-12-2006

Handwritten: 10/9/07

Handwritten signature: *(Signature)*

Chairman
Beldanga Municipality

Chairman
Beldanga Municipality

Requisition of fund for the period July to September 2007

SI No.	Item of Expenditure	Expenditure (Amount in Rs.)	SI No.	Item of Expenditure	Expenditure (Amount in Rs.)
--------	---------------------	-----------------------------	--------	---------------------	-----------------------------

Non Recurring

Recurring

1.	Equipment	42000000			
2.	Furniture	5000000			
3.	Computer	1000000			
4.	Subsidy	1000000			
5.	Renovation works	1000000			
6.	Base Line Survey	1000000			
7.	Family education training material	1000000			
8.	ITMS (M. P. I. W. K.)	1000000			
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					
22.					
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30.					
31.					
32.					
33.					
34.					
35.					
36.					
37.					
38.					
39.					
40.					
41.					
42.					
43.					
44.					
45.					
46.					
47.					
48.					
49.					
50.					
51.					
52.					
53.					
54.					
55.					
56.					
57.					
58.					
59.					
60.					
61.					
62.					
63.					
64.					
65.					
66.					
67.					
68.					
69.					
70.					
71.					
72.					
73.					
74.					
75.					
76.					
77.					
78.					
79.					
80.					
81.					
82.					
83.					
84.					
85.					
86.					
87.					
88.					
89.					
90.					
91.					
92.					
93.					
94.					
95.					
96.					
97.					
98.					
99.					
100.					

Operating cost (Salaries, P.M.I., Postage & telephone I.A.D.A. etc.)

(Signature)
 Beldanga Municipality

Beldanga Municipality

Ch. Moh. 12.9.07

OFFICE OF THE BOARD OF COUNCILORS, CHANDRAKONA MUNICIPALITY

P.O. : Chandrakona * Dist. : Paschim Medinipur

Ref. No. ...534/e.H.M./H.W/07

Date : 10.9.07

To
The Director, SUDA (Health Wings)
ILGUS Bhavan, HC Block, Sector - III
Bidhannagar, Kolkata - 700091



Sub: Requisition of Fund for the period October 2007 to December 2007.

Sir,

This is to inform you that, as per the SoE submitted up to the August 2007 the presently balance of C.B.P.H.C.S. fund is amounting to Rs. 37961/-.

So, I request you to release the necessary fund for the period October 2007 to December 2007 for Honorarium to HHWs amounted to Rs. 36000/- and Equipment for M&S Cell amounted to Rs. 120000/- at your earliest convenience.

Thanking you.

Yours faithfully,

Biswanath Mondal 10/9/07

(Biswanath Mondal)
Chairman
Chairman,
Chandrakona Municipality.

Requisition of fund for the period October 2007 to December 2007

Sl. No.	Items	Requisitioned Amount Rs.
	Non-Recurring	
1	Equipment (for M & S Cell)	120000.00
2	Furniture	
3	Construction (Not applicable for the present)	
	a) Sub-Center	
	b) OPD cum Maternity Home	
	c) OPD	
4	IEC & Material	
5	Renovation works	
6	Base Line Survey	
7	Family Schedule, Training Manual, HMIS format & HHW Kit	
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	
	Recurring	
9	Honorarium (to HHWs)	36000.00
10	Salaries	
11	Rent	
12	Training	
13	Drug	
14	IEC	
15	Operating Cost (Sundries, Printing, postage & telephone, TA / DA etc.)	
Total		156000.00

Rs. 1.56 lakhs may be released.

Fund Release 2,13,500 = 00
 SOE submitted 1,75,039 = 00 (82.2%)

Biswanath Pal
 10/9/07
 Chairman,
 Chandrakona Municipality

Office of the Councilor

KHIRPAI MUNICIPALITY

P.O. - KHIRPAI DIST. - PASCHIM MEDINIPUR

Mem. No. 14/07

Date: 17/07

From: The Chairman/Vice Chairman
KHIRPAI MUNICIPALITY

To
The Director
SUDA
ILGUS BHAVAN, 107, BANGS Road III,
Bidhanagar, Saraloke, Kolkata-91

Sub: Requisition of fund for Health Programme and ... application format of UJSY.

Sir, Madam,

With reference to the above subject this to inform you that this Municipality has incurred expenditure more than 70% of the fund already placed to this Municipality on 1st phase for the health programme under Community Based Primary Health Care Services. Requisition for fund is placed in the prescribed format. Kindly place fund in the ...

For UJSY this Municipality is in need of further fund for the ... pending applications. The U.C. upto August '07 has been submitted.

100 (one) hundred Nos UJSY cert. Application format ... be supplied to this office as an early date

SEP 2007
KHIRPAI MUNICIPALITY
PASCHIM MEDINIPUR

Respectfully
Chairman
KHIRPAI MUNICIPALITY
PASCHIM MEDINIPUR

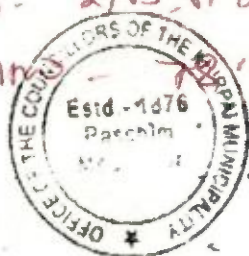
Requisition of fund for 3 months is to be submitted by the Chairperson to Director, SIDA as per format along with a forwarding letter.

Requisition of fund for the period September 2007 to November 2007

Sl. No.	Items	Requisitioned Amount in Rs.
Non-Recurring		
1.	Equipment	40000/-
2.	Furniture (For seating arrangement of 4 Category Offices) (New requirement)	20000/-
3.	Construction (Not applicable for the present)	
	a) Sub-Centre	-
	b) OPD cum Maternity Home	-
	c) OPD	-
4.	L.E.C & Materials	2000/-
5.	Renovation Works	
6.	Base Line Survey	5000/-
7.	Family Schedule, Training manual, HMIS format & HIR. Kit bag (To be printed)	2000/-
8.	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	-
Recurring		
9.	Honorarium	30000/-
10.	Salaries	60000/-
11.	Rent	-
12.	Training	-
13.	Drug	-
14.	L.E.C.	1000/-
15.	Operating Cost (Sundries, printing, postage & telephone, IA / DA etc.)	5000/-
TOTAL		1,65,000/-

(One Lakh sixty five thousand only)

Fund released - 2,15,00,00.
SOB submitted (7%).



Signature of Chairman/Vice-Chairman

CHAIRMAN
KHIRATI
PASCHIM MEDINIPUR

Rs. 1.58 lakhs my best friend

Phone : 953218-220210 STD No. 03218-220210

Fax No. 953218-221044

JOYNAGAR MOZILPUR MUNICIPAL OFFICE

P.O. Joynagar Mozilpur , Pin Code No. 743337

SOUTH 24-PARGANAS

Memo No. J.M.M./H.H.W/ 235

Dated : 28.08.2007



*chheda
to process
03.09.07*

03 SEP 2007



From
Chairman,
Joynagar Mozilpur Municipality.

*PO (H)
31/8*



To
The Director, SUDA
Health Wing, ILGUS Bhavan,
HC Block, Sector - III,
Bidhannagar, Kolkata - 700 091

Sub. Submission of Requisition Fund for the period
from 1st August 2007 to 31st October 2007.

In respect of above mentioned subject we are submitting Requisition of Fund of Rs. 6,87,400.00 for the period from 1st August 2007 to 31st October 2007. Here we would like to mention that the present fund position is (-) Rs. 12,825.00.

Kindly issue the next allotment as early as possible for smooth running of health programme.

Thanking you,

Yours faithfully

[Signature]
CHAIRMAN

Joynagar Mozilpur Municipality

Community Based Primary Health Care Services in 63 Non - KMA ULBs

Name of the Municipality - Joynagar Majilpur Municipality

Requisition of Fund for the period from August'2007 to October'2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non-Recurring		
1	Equipment	122000.00
2	Furniture	110000.00
3	Construction : (Not applicable for the present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
4	I.E.C & Materials	20000.00
5	Renovation Work	
6	Base Line Survey	
7	Family Schedule, Training manual, HMIS format & HHW Kit bag	
8	Strengthening of Existing Maternity Homes & Dispensaries (Not applicable for the present)	
Recurring		
9	Honorarium	57400.00
10	Salaries	51000.00
11	Rent	9000.00
12	Training	
13	Drug	288000.00
14	I.E.C.	144000.00
15	Operating Cost (Sundries, Printing, postage & telephone, TA/DA etc.)	30000.00
TOTAL		687400.00

(Rupees Six Lakh Eighty seven Thousand Four hundred only)

Fund to be released 5.23 lacs

5,23,500.00



Signature of Chairman
 J.M. Municipality

Fund Released - 219000/-
 SOE submitted 231825/-

Community Based Primary Health Care Services in 63 Non - KMA ULBs

Statement of Expenditure

Name of the Municipality - Joynagar Majilpur Municipality

For the period from 01.08.2007 to 17.08.2007

Sl.No.	Voucher No.& Date	Item of Expenditure	Nature of Expenditure	Amount(Rs.)
1	HHW/07-08/21 ; 17/8/07	Furniture	Cost of Table, Almirah etc.	28800.00
2	HHW/07-08/22 ; 17/8/07	Computer	Partly paid towards cost of 2 computer & 2 Printer	40000.00
3	HHW/07-08/23 ; 17/8/07	Operating Cost	Cost of Xerox	25.00
4	HHW/07-08/24 ; 17/8/07	Honorarium	Paid to HHWs for the month of June'07	1334.00
5	HHW/07-08/25 ; 17/8/07	Honorarium	Paid to HHWs for the month of July'07	14000.00
TOTAL				84159.00



J. M. Majilpur 29/08/07
Signature of Chairman
J.M.Municipality

Community Based Primary Health Care Services in 63 Non - KMA ULBs

Status on Fund received & SOE submitted

Name of the Municipality - Joynagar Majilpur Municipality

(Amount in Rs.)

Fund Received from SUDA	SOE sent upto the month of July'2007	SOE during the period from .01.08.2007 to 17.08.2007	Total SOE	Balance
219000.00	147666.00	84159.00	231825.00	-12825.00



Joaneer
Signature of Chairman 29/08/09
J.M.Municipality



Chhotu
to check
13-9-07

☎ : (03452) 255 164

255 767

FAX : 256-600

OFFICE OF THE GUSKARA MUNICIPALITY

P.O. - Guskara, Dist. - Burdwan, Pin - 713128, W.B.

ESTD : 1988

Memo No. : 714 IG.M.

Dated, Guskara, the 11.09.2007

To
The Director,
State Urban Development Agency (SUDA),
Health Wind,
ILGUS Bhavan, HC Block, Sector-III,
Bidhannagar, Kolkata - 700106.

13 SEP 2007



Sub : Requirement for sanction of Rs.3,79,000.00 for Computer, Sub-Centre, Honorarium, Salary etc. under Community Based Primary Health Care Services of Guskara Municipality.

Madam,

As per directive conveyed by the SUDA the newly recruited HHW are engaged at filling up the Family Schedule Book of the BPL Families and constructed of M & S.Cell by this Municipality.

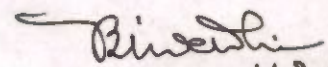
So, you are hereby requested to sanction of an amount for Rs.3,79,000.00 (Rupees three lakhs Seventy Nine thousand only) from our requisition slip are enclose herewith.

In this connection this is to inform you that out of Rs. 2,27,000/- released by you vide NO- SUDA-Health/63ULBs/06/67 dt- 19/09/2006 a sum of Rs. 2,03,003/- upto 31/08/2007 have already been spent i.e more than 70%.

Thanking you,

Enclo:- SOE Annexure-1

Yours faithfully,


Chairman 11.9.07
Guskara Municipality.

Office of the Guskara Municipality
P.O. Guskara, Dist. Burdwan.

Submission of Requisition of Fund

Requisition of fund for 3 months is to be submitted by the Chairman to Director, SUDA as per format along with a forwarding letter.

Requisition of fund for the Period from 01.09.2007 to 30.11.2007

Sl. No.	Items	Requisitioned Amount in Rs.
NON-RECURRING		
1	Equipment for M & S.Cell (Computer)	40,000.00
2	Furniture for M & S Cell and Sub-Centre	1,50,000.00
3	Construction : (Not applicable for the present)	
	a) Sub-Centre	NIL
	b) OPD Cum Maternity Home	NIL
	c) OPD	NIL
4	I.E.C. & Materials	NIL
5	Renovation Works	20,000.00 X
6	Base Line Survey	NIL
7	Family Schedule , Training Manual, HMIS format & HHW Kit Bag	5,000.00 X
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	NIL
RECURRING		
9	Honorarium	48,000.00
10	Salaries	1,00,000.00 76000
11	Rent	6,000.00
12	Training	NIL
13	Drug	NIL
14	I.E.C.	NIL
15	Operating Cost (Sundries, Printing, Postage & Telephone, TA/DA etc.	10,000.00
	TOTAL =	3,79,000.00

Fund Released
SOB Submitted

Rs. 3.30 lacs
ms le galam)

2,27,000/-
2,03,003/- (89.41)

3.30,000.00
Princedi
Chairman 12/11/07
Guskara Municipality.



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/1255

তারিখ 17.09.2007

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

**Sub : Preparation of Account Payee Demand Draft
Current Account No. 01000050203.**

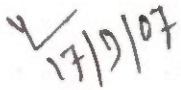
Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Kalimpong Municipality	5,90,000.00	Kalimpong
2.	Chairman, Mekhliganj Municipality	2,17,000.00	Jalpaiguri
3.	Chairman, Tamluk Municipality	5,35,000.00	Tamluk
Total		13,42,000.00	
(Rupees Thirteen Lakh Forty Two Thousand only)			


(Debasis Mitra)
Joint Secretary
M.A. Department, GOWB


(C. Sircar)
Director
SUDA

তমলুক পৌরসভা

OFFICE OF THE COUNCILLORS OF TAMLUK MUNICIPALITY

স্থাপিত - ১৮৬৪ ★ Estd. - 1964

তমলুক - পূর্ব মেদিনীপুর - ৭২১৬৩৬ ★ TAMLUK - PURBA MEDINIPUR - 721636

Phone : (03228) 266007 / 267370 / 269537, Fax - (03228) 267370

প্রেরক From: Sri Prithwis Nandy.
পৌরপ্রধান Chairman
তমলুক পৌরসভা
Tamluk Municipality
প্রতি To:



স্মারক / পত্রিক Memo No. 627..
তারিখ, তমলুক,
Dated, Tamluk, The 24th Aug., 07.

The Director
State Urban Dev., Agency
Kolkata - 91.



Sub :- Requirement of fund for community
Based Primary Health Care Service.

Sir,

This is to inform you that the requirement
of fund for Honorarium of HHW and Health Assis-
tant, operating cost etc. is forwarded for taking
necessary action and release the fund as early as
possible.

Enclo :- As stated.

Yours faithfully,

(P. NANDY.)
Chairman,
Tamluk Municipality.
CHAIRMAN

TAMLUK MUNICIPALITY



Fund released 2,50,000/-
SOE submitted 216336/- (86's)

TAMLUK MUNICIPALITY

REQUIREMENT OF FUND FOR COMMUNITY BASED PRIMARY HEALTH CARE SERVICE

Period July'07 to Sep'07.

01. Honorarium of 22 Nos HHW – per month Rs. 22,000/- from July' 07 to Sep.'07(3 months).	....	Rs. 66,000.00	✓
02. Operating cost per month Rs. 10,000/- from July' 07 to Sep.' 07 (3 months).	....	Rs. 30,000.00	✓
03. DRVGS cost for each sub center per year 3 months (Total 5 Nos sub center) Rs. 8,000/- per month.	....	Rs. 1,20,000.00	✓
04. Cost of Equipment and Furniture per sub center Rs. 45,000/- (Total 5 sub center).	....	Rs. 2,25,000.00	✓
05. Honorarium/ Salaries 5 Nos Health worker and 1 Nos Doctor from July' 07 to Sep' 07 (3 month) Rs. 31,500/- per month.	....	Rs. 94,500.00	✓ 94,000.00
TOTAL	....	Rs. 5,35,500.00	✓

(Rupees Five Lakhs Thirty-Five Thousand Five Hundred Only.)

Rs. 5.35 lakhs may be released

12.9.07.



[Signature]
CHAIRMAN
TAMLUK MUNICIPALITY

TAMILUK MUNICIPALITY

REQUIREMENT OF FUND FOR COMMUNITY BASED PRIMARY HEALTH

CARE SERVICE

01. Honorarium of 22 Nos HIW - per month Rs. 22,000/- from July '07 to Sep '07 (3 months)	Rs. 66,000.00
02. Operating cost per month Rs. 10,000/- from July '07 to Sep '07 (3 months)	Rs. 30,000.00
03. DRUGS cost for each sub center per year 3 months (Total 2 Nos sub center) Rs. 8,000/- per month	Rs. 1,20,000.00
04. Cost of Equipment and Furniture per sub center Rs. 45,000/- (Total 2 sub center)	Rs. 2,25,000.00
05. Honorarium Salaries 2 Nos Health worker and 1 No. Doctor from July '07 to Sep '07 (3 months) Rs. 31,500/- per month	Rs. 94,500.00
TOTAL	Rs. 2,35,200.00

(Rupees Five Lakhs Thirty-Five Thousand Five Hundred Only)

Rs. 2,35,200/-
 15/11/07
 District Engineer
 Tamil Nadu



Office of the Councillors of :

Mekliganj Municipality

P.O.: Mekliganj, Dist.: CoochBehar

Phone No.: (03584) 255 249, 255 480, 255 458, Fax No.: (03584) 255 249



14.8.07

Memo no ... *610/XV/111/07-08*

Fund released 382000/-
SOB Submitted 316800/- Date *11/8/07*
(82.9%)

From :: The Chairman,
Mekliganj Municipality
Mekliganj, Cooch Behar.

To :: The Director,
State Urban Development Agency
H.C. Block, Sec-III, Bidhannagar, Kolkata-700001.

Sub:- Statement of Expenditure and summary statement
along with status on Fund Allotment under CHS
Programme.

Dear Sir/Madam,

Enclosed please find herewith the Statement of Expenditure (SOE) and summary statement of Accounts along with status on fund allotment under CEPHCS Programme for the period from April, 2007 to July, 2007.

The UC on Expenditure made for the Quarter ending June, 2007 and upto July, 2007 is also enclosed herewith.

We have spent 82.93% of the fund allotted so far. We also have identified premises to establish two subcentres in rented house on a rent of $\text{Rs. } 1000/\text{PN}$ and the other ^{one} Municipal building. The details of sketchmap and particulars of specifications and location is being sent to your shortly.

Now I submit the details of requirements of further fund (third instalment) as below:-

- | | |
|---|---|
| 1. Monthly remuneration of HHWs for the period from October, 2007 to December, 2007 | $\text{Rs. } 1000/- \times 9 \times 3 = 27,000/-$ |
| 2. Furniture Purchase for two subcentres | $\text{Rs. } 20,000/- \times 2 = \text{Rs. } 40,000/-$ |
| 3. Purchase of equipment for two Sub Centre | $\text{Rs. } 25,000/- \times 2 = \text{Rs. } 50,000/-$ |
| 4. Cost of Drugs & Medicine estimated to be required under the kitbags of HHWs | $\text{Rs. } 50,000/- \text{ per sub centre} \times 2 = 1,00,000/-$ |
| Total $\text{Rs. } 2,17,000/-$ | |

(Rupees Two lakhs seventeen thousand only)

For your kind information, the unspent balance of $\text{Rs. } 66,800/-$ will be spent towards payment of cost of some furniture, water purifier, mobility support and some operating costs etc and SoE will be sent to you by 10th of each month.

Enclo: As Stated

Yours faithfully

OC

*Rs. 2.17 lakhs may be released
12.9.07*

Sailem Das
Vice-Chairman
Mekliganj Municipality
Mekliganj, Cooch Behar

Requisition

KALIMPONG

Acquisition of Fund for Procurement of Furniture, Equipment and Drugs for Sub-Centres under Community

Based Primary Health Care Service as per Letter No. SUDA-Health\63 ULB\107\198, dtd. 02.07.2007

Sl.No.	Item of Expenditure	Expenditure Amount in Rs.)	Sl.No.	Item of Expenditure	Expenditure Amount in Rs.)
	Non-Recurring			Recurring	
1	Furniture:				BFD 5,64,000:00
	As per Annexure- I for 04 sub-centre	80,000:00	2	Monthly honorarium to 23 nos. of Honorarium Health Workers (July 2007 to March 2008) <i>Oct 2007</i>	2,07,000 <i>92,500/-</i>
	As per Annexure- II for 04 sub-centre	1,00,000:00	3	Monthly salary of 06 nos. of contractual workers i.e. Medical Officer, S.J. Health asstt., Computer Asstt., A/c Asstt., S.K. Clerk (July 2007 to March 2008) <i>July 07 to Oct 07</i>	2,70,000:00 <i>1,26,000/-</i>
	As per Annexure- III for 04 sub-centre	3,84,000:00 <i>1,92,000/-</i>			
	CWO	5,64,000:00		TOTAL	10,41,000:00 <i>5,90,000/-</i>

Fund released 253000/-
SOF submitted 183518/- (72.5%)

Rs 590 labels

12.9.07

20-8-07
Chairman
Kalimpong Municipality

C. K. Kumai
Chairman
Kalimpong Municipality

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 "ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 10/11

তারিখ 20.08.2007

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

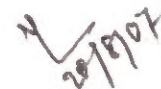
You are requested to kindly arrange for preparation of the following Account Payee Demand Draft as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Ranaghat Municipality	2,71,000.00	Ranaghat
Total		2,71,000.00	

(Rupees Two Lakh Seventy One Thousand) only



(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB



(C. Sircar)
 Director
 SUDA

Partha Sarathi Chatterjee

B. COM. LLB, ADVOCATE

CHAIRMAN, RANAGHAT MUNICIPALITY



Office of the Councillors of Ranaghat

Municipality (Estd. - 1864)

P.O. : Ranaghat, Dist : Nadia,

Pin-741201 (WB)

☎ : (03473) 210030 (Off), 210-047/221 (Resi)

Ref. 1037/RM

*Chhru
to pracy*

*PO(H)
14/8*



Date 7-8-07

To
The Director,
State Urban Development Agency,
"Health Wing", Ilgus Bhavan,
Bidhannagar, Kolkata.

Sub :- Requirement of fund under C.B.P.H.C
of Ranaghat Municipality.

Ref :- SUDA-Health/65/ULB'S/06/62 dt. 19.09.06.

Dear Sir,

In referende to the subject and Memo
No. quoted above, I am to enclose herewith requirement
of fund under C.B.P.H.C for your ~~ki~~ taking necessary
action.

Enclo :- As stated.

Yours faithfully,

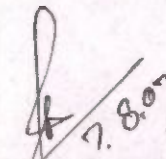
Chairman,
Ranaghat Municipality.

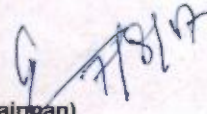
*Fund Aclowd
SOP submitd
1.94 lakh
191640.50 (98.78%)*

Ranaghat Municipality

Requisition of fund for the period 1st August to 31st October, 2007

S.No	Item of Expenditure	Expenditure(Amount in Rs.)	S.No	Item of Expenditure	Expenditure(Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment	220,000.00	9	Honorarium	94,500.00
2	Furniture	107,271.50	10	Salaries	71,040.00
3	Construction: (Not applicable for the present)		11	Training	9,000.00
	a) Sub-Centre		12	Rent	Nil
	b) OPD cum Maternity Home		13	Drug	96,000.00
	c) OPD		14	I.E.C	Nil
4	I.E.C & Materials	Nil	15	Operating Cost(sundries, printing, postage & telephone, TA/DA etc.)	Nil
5	Renovation Works	Nil			
6	Base Line Survey	Nil			
7	Family Schedule, Training manual, HMS format & HHW kit	Nil			
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)				
		327,271.50		TOTAL	270,540.00


7.8.07
(Accountant)


7/8/07
(Chairman)

Rs. 2.71 lakhs.
may be returned

সুডা

SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 976

তারিখ 14.08.2007

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Draft as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Haldibari Municipality	3,39,000.00	Jalpaiguri
2.	Chairman, Chakdah Municipality	6,11,000.00	Chakdah
Total		9,50,000.00	
(Rupees Nine Lakh Fifty Thousand) only			

(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB

(C.Sircar)
 Director
 SUDA

S.T.D NO.-03473
Phone No.-242023

**OFFICE OF THE COUNCILLORS
CHAKDAHAN MUNICIPALITY
CHAKDAHAN, NADIA
(West Bengal)**

Memo no: 455 /C.M

Date: 9/08/2007

FROM: Dr. Kapak Moitra,
The Chairman, Chakdahana Municipality.



TO: The Director,
State Urban Development Agency
Health Wing,
ILGUS Bhavan
Kol-106

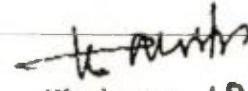
Sub Requisition for further H.H.W. Fund.

Sir,

Our H.H.W Fund position stands an amount of Rs. 41,341/- (Rupees Forty one thousand three hundred forty one only), which is less than Rs. 71,700/- (30% of fund received). For smooth running of our Community based Primary Health Care Services Programme, please send our next allotment of Rs. 6,42,500/- (Rupees Six lac forty two thousand five hundred only) for coming three months i.e. August to October 2007 as per enclosed sheet.

Thanking you.

Your's Truly,


Chairman 10.8.07

Chakdahana Municipality

Chairman,
Chakdahana Municipality
Chakdahana, Nadia

Enclosed: Requisition sheet as per your format.

Fund released: 2,39,000/-
SUE Received: 1,77,659/- (74.33%)



Requisition of Fund for the Period August to October 2007

Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment	270000.00	9	Honarium	60000.00
2	Furniture	80000.00	10	Salaries	94500.00
3	Construction :		11	Rent	12000.00
	(Not applicable for the present)		12	Training	Nil
	a) Sub-Centre		13	Drug	96000.00
	b) OPD cum Maternity Home		14	I.E.C	Nil
	c) OPD		15	Operating Cost (Sundries, printing, postage & tele phone, TADA etc.)	30000.00
4	I.E.C. & Materials	NIL			
5	Renovation Works	Nil			
6	Base Line Survey	Nil			
7	Family Schedule, Training manual, HMS format & HHW Kit	Nil			
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)				
				TOTAL	642,500.00

74000.00
63000.00

6,11,000

(Signature)
10.9.07

Signature of Chairman / Vice-Chairman

B. G. 11 Labels

OFFICE OF THE COUNCILLORS

Haldibari Municipality

P. O.—Haldibari ● Dist.—Coochbehar

Pin—735122

Ref No 845/Health

Date 08.08.07

To
The Director,
State Urban Development Agency,
Health Wing, ILGUS Bhavan.

13 Aug 2007



Requisition

Sub: Submission of ~~SOE and UC~~ in respect fund
of Community Based Pry. Health Care Service
for the month of July, 2007.

Madam,

In connection with the subject mentioned above I am submitting herewith the SOE and UC in the prescribed proforma along with vouchers for the month of July, 2007 for favour of your kind information and taking necessary action please.

Enclosed : As stated.

Yours faithfully,

[Signature]
Chairman,
Haldibari Municipality.

Fund released 2.11 Lakhs.
SIE Received 2,10,550/-
(99.78%)

COMMUNITY BASED PRIMARY HEALTH CARE SERVICES

Haldibari Municipality. Dist : Cooch Behar

Requisition of fund for the period June to August, 2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non-Recurring		
1.	Equipment (For 3 no. of Sub-Centres)	75,000/-
2.	Furniture (For 3 no. of Sub-Centres)	60,000/-
3.	Construction (Not applicable for the present)	Nil
4.	LE.C. & Material	Nil
5.	Renovation Works	Nil
6.	Base Line Survey	Nil
7.	Family Schedule, Training Manual, HMIS format & HHW Kit bag	Nil
8.	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	Nil
Recurring		
9.	Honorarium	33,000/-
10.	Salaries	60,000/-
11.	Rent (For 3 no. of Sub-Centres)	9,000/-
12.	Training	Nil
13.	Drug (For 3 no. of Sub-Centres)	72,000/-
14.	LE.C.	Nil
15.	Operating Cost (Sundries, printing, postage & telephone, TA/DA, advertisement etc.)	60,000/-
TOTAL		3,69,000/- - 30,000/- 3,39,000/-

Raju C. B. K.
Accounts & Finance Co-ordinator
HALDIBARI MUNICIPALITY
COOCH BEHAR,

3,39,000/-
 Chairman
 Haldibari Municipality.
 8.8.07

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নংSLIDA-67/2006/928

তারিখ 07.08.2007

From : Director. SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Bongaon Municipality	6,90,000.00	Bongaon
2.	Chairman, Taherpur N.A.A.	2,88,000.00	Ranaghat
3.	Chairman, Mal Municipality	3,67,000.00	Mal
4.	Chairman, Habra Municipality	9,95,000.00	Habra
5.	Chairman, Katwa Municipality	5,83,000.00	Katwa
6.	Chairman, Rampurhat Municipality	4,55,000.00	Rampurhat
7.	Chairman, Kurseong Municipality	1,56,000.00	Kurseong
Total		35,34,000.00	
(Rupees Thirty Five Lakh Thirty Four Thousand) only			

(Debasis Mitra)
 Joint Secretary

M.A. Department, GOWB

(C. Sircar)
 Director
 SUDA

দূরভাষ : ২৩৫৮ ৬৪০৩/৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : dirsudawb@yahoo.com

Estd:1879

Ph: 2344286/2344527

OFFICE OF THE COUNCILLORS OF
KURSEONG MUNICIPALITY
KURSEONG

Memo No. 536/M/Gm/07

Dated the 01st Aug 07.

From
Shri P. C. Agarwal,
Chairman,
Kurseong Municipality,
Kurseong.

To
The Director, SUDA
ILGUS Bhawan,
H.C. Block, Sector-III,
Bidhannagar, Kolkata-91



Sub: Submission of Utilisation Certificate of HHW

06 AUG 2007

Sir,

Enclosed please find the Utilisation Certificate of HHW amounting to Rs. 2,39,000.00 sanctioned to Kurseong Municipality vide G.O. No: SUDA-Health/63ULBs/06.119 dt. 05.10.2006 & out of this fund the Municipality has Utilised a sum of Rs. 2,04,673.00.

Please release further grant urgently as this Municipality has to pay a monthly Salary to the Health Workers and to meet other expenditure.

Yours faithfully,

Chairman,
Kurseong Municipality

Encl: Statement of Expenditure
Form of Utilization
Duplicated Voucher

Memo No. 236/S/M/Gm/07

Dated the 01st Aug 07.

Copy forwarded for kind information :

1. The Director of Local Bodies ,Purta Bhawan(1st Floor)
Bidhannagar, Salt Lake City, Kolkata
2. Shri S.K. Bhowmik, Joint Secretary, Govt. of W.B.
Municipal Affairs Deptt. Writers' Building
Kolkata
3. ✓ Dr. S. Goswami, Project Director,
Health Wing, SUDA. Salt Lake ,Kolkata

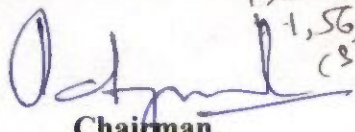
Chairman,
Kurseong Municipality

KURSEONG MUNICIPALITY

KURSEONG

Requisition of fund for the period from 01.07.2007 to 30.09.2007:

Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Items of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1.	Equipment	-	9.	Honorarium (24560x(24) x3)=	73,680.00
2.	Furniture	-	10	Salaries (5,000x(4) x3) =	60,000.00
3.	Construction (not applicable for the present)	-	11	Rent of Centre (1,000x (4) x3)=	12,000.00
	a) Sub-Center	-	12	Training/Tiffin Allowance	-
	b) OPD cum Maternity Home	-	13	Drug	-
	c) OPD	-	14	LEC	-
4.	I.E.C & Materials	-	15	Operating Cost(Sundries; Printing Postage & telephone, TA/DA etc)	10,000.00
5.	Renovation Works	-	16.	Trainees'	
6.	Base Line Survey	-	17	Contingency	5,000.00
7.	Family Schedule, Training manual, HMS format & HHW kit	-	-	-	-
8.	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	-	-	-	-
	Total:			Total:	1,60,680.00

1,55,680
1,56,000
(S.M.)

Chairman,
Kurseong Municipality

OFFICE OF THE

PHONE : (03461) 255008
258678

RAMPURHAT MUNICIPALITY

P.O. - RAMPURHAT ❖ DIST. - BIRBHUM (W.B.)
PIN CODE - 731224

Ref. No. 22.10.

Date. 03. 8. 07.

To
The Director,
SUDA
HEALTH WING
ILGUS BHAVAN
H.C. Block, Sector-III
Salt Lake
Kolkata, 91.

Sub:- Submission of ~~muti~~ statement of expenditure and voucher details of July'07 of the grants sanctioned to Rampurhat Municipality.

In reference to above I am submitting herewith the statement of expenditure of the grants sanctioned to Rampurhat Municipality for the month of July'07 in proper ~~form~~ proforma for your information & taking necessary action. Please note that - 81% of the grants have been utilised.

Enclo:- As stated.

Dutta
Chairman,
Rampurhat Municipality

No. _____ Dated _____/07

Copy to Acctt. R.M. for information.

Chairman,
Rampurhat Municipality



August to October 2007

Requisition of fund for the period 2007 to 2006 2007.					
Sl. No.	Item of expenditure	Expenditure (Amount in Rs)	Sl. No.	Item of expenditure	Expenditure (Amount in Rs)
	Non- Recurring			Recurring	
1	Equipment <i>ref no -</i>	<i>1,20,000.00</i> <i>SUDA Health/63/118</i> <i>107/11-(63)</i>	9	Honorarium	51,000.00
2	Furniture		10	Salaries	109500.00
3	Construction (Not applicable for the present)		11	Rent	15000.00
	a) Sub-Center.		12	Training	
	b) O P D cum Maternity home		13	Drug	1,20,000.00
	c) O P D		14	I.E.C	
4	I.E.C & materials		15	Operating cost (sundries, Printing, postage & Telephone, T.A/ D.A etc)	50,000.00
5	Renovation Works				10,500.00
6	Base line Survey				
7	Family schedule, Training Manual, HMS Format & HHW Kit				
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)				
				Total	4,65,500.00

(Rupees four lakh sixty five thousand five hundred only) 455000.00

Ref - 2048 Dated - 19.07.2007.

Dutta
Chairman/Vice-Chairman.
Rampurhat Municipality.

Copy forwarded to the Project Officer, Health Wing SUDA, ILGUS Bhavan, Sector-III, Salt Lake, Kolkata-91.

ATTESTED

Dutta
Chairman / Vice-Chairman,
RAMPURHAT MUNICIPALITY



Dutta
Chairman/Vice-Chairman.
Rampurhat Municipality

Rs. 4.55 lakhs
my des rd ans
[Signature]

**Community Based Primary Health Care Services
In 63 Non – KMA ULBs
Status on Fund Allotement and SOE**

Name of the Municipality---- Rampurhat

For the month of July, 2007

(Amount in Rs.)

Fund Received from SUDA	SOE sent up to the month of June, 2007	SOE during the month of July, 2007	Total SOE	Balance
2,30,000.00	32,747.00	1,54,773.00	1,87,520.00 (81,571.00)	42,480.00

Dutta

Signature of Chairman / Vice - Chairman



KATWA MUNICIPALITY

**From : Chairman,
Katwa Municipality.**

To
The Director,
SUDA - Health-Wing,
"ILGUS BHAVAN"
HC Block, Sector- III,
Kolkata- 700 091

Sub.: Requisition of fund as advance under HHW Scheme.

Sir,

I would like to inform your honour that the first phase of Rs.2,56,000/= was received by this Municipality vide letter -SUDA-Health/63 ULBs/06/68 dated 19/09/2006. Said advance of HHW Scheme has comedown at Rs.61,469/= on 06/07/2007 Which exceed the 70% of expenditure on the last instalment.

This is already inform to you dated on 09.07.2007 attached with the UC and SOE of the month ended June' 2007.

Please arrange to place the fund as per norms at the disposal of this Municipality at the earliest convenience.

Recd 2-8-07
Chairman
Chairman
Katwa Municipality

*Fund Released 2,56 Lakhs
SOE Submitted 1,94,531/- (75.98%)*

KATWA MUNICIPALITY

Requisition of fund for the period July' 2007 to September' 2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment	125,000.00	9	Honorarium	96,000.00
2	Furniture	100,000.00	10	Salaries	126,371.00
3	Construction <i>(Not applicable for the present)</i>		11	Rent	116,000.00
	a) Sub-Centre		12	Training	
	b) OPD cum Maternity		13	Drug	96,000.00
	c) OPD		14	LEC	
4	LEC & Materials		15	Operating Cost <small>(Sundries, printing, postage & Telephone, TA/DA etc.)</small>	50,000.00 40,000.00
5	Renovatiion Works				
6	Base Line Survay				
7	Family Schedule Training manual, HMS format & HHW Kit				
8	Strengthening of existing Moternity Homes & Dispensaries <i>(Not applicable for the present)</i>				
TOTAL					593,371.00 583,000.00

Rs. 5.83 Lakhs.
may be released.

25/7/07
Chairman
Chairman
Katwa Municipality



Habra Municipality

Chairman

30/7/07
[Signature]

Yours faithfully

*Fund released 3.12 Lakhs
Soe submitted 2,35,083/- (75.6%)*

Thanking you,

fund in favour of Habra Municipality.

Under this circumstance you are therefore requested to release further been submitted (more than 70% of the fund received). quarter and statement of expenditure up to the month June '07 has already programme within Habra Municipal area. The utilization for the last June '07 to Aug '07 which is required for smooth conduction of H.H.W. I am to submit herewith the requisition of fund for the period from

Sir,

Sub: Requisition of fund for conduction of H.H.W. Programme.

Salt Lake, Kolkata-700091

ILGUS BHAVAN, H.C. Block, Sector III

Health Wing

State Urban Development Agency

The Director

To



Ref. No. HM/667/P.H./07.

Date 31-7-07.

PROMODE DASGUPTA SARANI, P. O. HABRA, NORTH 24 PARGANAS, PIN - 743263

POURA BHAWAN

(ESTD. - 1979)

HABRA MUNICIPALITY



Phone : Office Hab. 270572

S.T.D. No.: 953216



HABRA MUNICIPALITY

(ESTD. - 1979)

POURA BHAWAN

PROMODE DASGUPTA SARANI, P. O. HABRA, NORTH 24 PARGANAS. PIN - 743263

Ref. No.

Date

Requisition of fund for the period July'07 to Sept'2007

SL No.	Item of Expenditure	Required fund Amount in (Rs.)
Non-Recurring		
1.	Equipment (Fax, Computer and equipments for sub-centres)	310000.00
2.	Furniture (M & S Cell and subcentres)	280000.00
3.	Construction : (Not applicable for the present)	24000.00
	a) OPD cum Maternity Home	
	b) OPD	
4.	I.E.C. & Materials	
5.	Renovation Works	50000.00 X
6.	Base Line Survey	
7.	Family Schedule, Training manual, HMIS format & HHW kit bag	
8.	Strengthening of existing Maternity Homes and Dispensaries (not applicable for the present)	
Recurring		
9.	Honorarium	120000.00
10.	Salaries	112500.00 X
11.	Rent	24000.00
12.	Training (Rest of the furniture & equipments)	24000.00
13.	Drug	192000.00
14.	I.E.C.	
15.	Operating Cost (Sundries, printing, postage & telephone, TA/DA etc.)	111250.00
TOTAL		1223750.00

995000.00



Signature of Chairman/ Vice-Chairman

[Signature]
30/7/07

CHAIRMAN
HABRA MUNICIPALITY

Rs. 9.95 lakhs.
may be released.
[Signature]

Office of the Councillors of Mal Municipality

P. O. MAL, DIST. JALPAIGURI PIN-735221

ESTD. - 1989

Ref. No. MM/C/334/07-08Date 01-08-2007From : The Chairperson,
Mal MunicipalityTo : The Project Director, SUDA,
(Health Wings)
Ilgus Bhavan, H.C Block, Sector III,
Bidhannagar
Saltlake City : 700106Sub: Submission of SOE for the Month of
July, 2007 and requisition for Fund
Ref : Your instruction in this connection.

Sir,

In reference to the above I am submitting herewith the SOE for the month of July, 2007 and requisition of Fund up to October, 2007 as per your proforma for your information and taking necessary action please.

I would, therefore, request you to please arrange to place fund, as stated in our requisition, for smooth running of the works

Thanking you.

Yours sincerely

*S Ghosh*Chairperson
Mal Municipality
Chairperson
Mal Municipality
Mal, JalpaiguriEncl AS stated (1) 7 (seven) sheets,
including copy of vouchers.

Memo No. MM/C/ /1(1)2007-08 Dated. 01.08.2007

Copy to : 1) Accounts Section, Mal municipality
2) Office File.*S Ghosh*
Chairperson

*Fund released 2.27 lakhs.
SOE submitted 1,95,320. (86.04%)*

Mal Municipality

Requisition of Fund for the period August, 2007 to October, 2007

Mal Municipality

Sl. No	Item of expenditure	Expenditure (Amount in Rs.)	Sl No	Item of expenditure	Expenditure (Amount in Rs.)
	Non- Recurring			Recurring 1.	
1.	Equipment	Rs.1,80,000.00	9	Honorarium	Rs.37,000.00
	Furniture	Rs.1,30,000.00	10	Salaries	
3	Construction (Not applicable at present)		11	Rent	
	a)Sub-Centre		12	Training	
	b)OPD-Cum-Maternity Home		13	Drug	
	c)OPD		14	L.E.C	
4	L.E.C & Materials		15	Operating cost (Sundries printing, postage,& telephone,TA/DA etc)	Rs.20,000.00
5.	Renovation Works				
6	Base Line Survey				
7	Family Schedule, Training manual,HMIS format & HHW Kit				
8	Strengthening of Maternity Home & Dispensaries (Not applicable at present)				
				TOTAL.	Rs.3,67,000.00

(Rupees Three Lakhs sixty seven thousand only)

Sgho sh
**Chairperson
Mal Municipality**

**Chairperson
Mal Municipality
Mal, Jalpalguri**

*Rs. 3.67 Lakhs,
may be released,
[Signature]*



Tale-Fax-03473-260250

Office of the Councillors of
Taherpur Notified Area Authority
Taherpur, Nadia

Memo No : 347 /07-08/TNAA

dated : 25/07/2007



From : Chairman

To
The Director,
State urban Development Agency,
Health Wings,
SUDA Bhaban, Salt Lake city,
Kolkata-91

PO (H)
27/7

Sub.: Requisition of fund for the period of July-07 to Sept-07.

Dear Madam,

Hereby I am sending Requisition of fund for the period of July-07 to Sept-07 under community Based primary Health Care service in 63 Non-KMA ULBs as per your given proforma and next grant with co-operation is expected your end and oblige.
Thanking you.

Encl.: As Stated above.

Yours faithfully,

Ashaji 26.7.07

(Aparna Bhattacharjee)

Chairman
TAHERPUR NOTIFIED AREA AUTHORITY
Taherpur, Nadia

Fund released 3.17 lacs.
SOR submitted 2,30,217/- (72.62%)

OFFICE OF THE COUNCILLORS OF
TAHERPUR NOTIFIED AREA AUTHORITY
TAHERPUR, NADIA.



Requisition of fund for the period July-07 to Sept.-07

Sl. No	Item of Expenditure	Amount (Rs.)	Sl. No	Item of Expenditure	Amount (Rs.)
Non-Recurring			Recurring		
1.	Equipment		9.	Honorarium	39,000.00
2.	Furniture		10.	Salaries	84,000.00
3.	Construction		11.	Rent	
a)	Sub. Centre		12.	Training	1150,000
b)	OPD Cum Maternity Home		13.	Drug	2,25,000.00
c)	OPD		14.	I.E.C.	6,000.00
4.	I.E.C. & Materials		15.	Operating cost (Sundries, Printing, Postage, & Telephone, T.A. / D.A. etc.	9,000.00
5.	Renovation Cost				
6.	Baseline Survey				
7.	Family Schedule, Training manual, HMIS Formate & HHW Kit bag.				
8.	Strengthening of existing maternity Homes & Dispensaries.				
				Total (Rs.)	3,63,000.00

Rs. 2.88 Lakhs
may be utilised

Ashajee
Chairman
TAHERPUR NOTIFIED AREA AUTHORITY
Taherpur, Nadia

26.7.07

3rd insty
fund
to be

STD Code No. : 03215
Phone : 255021
Fax : 257841

Office of the Bongaon Municipality

BONGAON, NORTH 24 PARGANAS.

SRI PRASANTA BALA
Chairman



Ref. No. : BM. 614



Dated : 14.07.07

To
The Director, SUDA,
'Health Wings', ILGUS BHAVAN,
HC- Block, Sector - III,
Bidhannagar,
Kolkata - 700091

02 AUG 2007
PO(H)
/18

- Sub : 1. Submission of SOE for the month of June, 2007
2. Submission of UC for the 4th quarter of 2006 - 2007
3. Submission of UC for the 1st quarter of 2007 - 2008
4. Submission of Requisition for the period of Jul, 07 to Sep, 07 of Rs.6, 90,000

Sir / Madam,

I am submitting SOE, UC, and Requisition in prescribed format. This is for your kind perusal and further necessary action.

Thanking you.



Yours faithfully
Prasanta Bala
Chairman 14-07-07
Bongaon Municipality

Find released 5.47 lakhs.
SOE Submitted 4,10,968/- (95.13%)



BONGAON MUNICIPALITY

Requisition of Fund for the period JUL,2007 to SEP,2007

SL. NO.	ITEM OF EXPENDITURE	Amt. Rs.	SL. NO.	ITEM OF EXPENDITURE	Amt. Rs.
NON- RECURRING			RECURRING		
1	Equipment (25,000x7S.C)	175,000.00	9	Honorarium (1,000x34P)+(1,000x1P)	35,000.00
2	Furniture (20,000x7S.C)	140,000.00	10	Salaris (6000x5M)+(5,500x5M)+(5000x5Mx4P)	157,500.00
3	Construction: (Not applicable for the present)	NIL	11	Rent	NIL
	a) Sub-Centre	NIL	12	Training	NIL
	b) OPD cum Maternity Home	NIL	13	Drug (24,000x7S.C)	168,000.00
	c) OPD	NIL	14	I.E.C	NIL
4	I.E.C. & Materials	NIL	15	Operating Cost (Sundries, Printing, Postage & Telephone, TA / DA etc.)	14,500.00
5	Renovation Works	NIL			
6	Base Line Survey	NIL			
7	Family Shedule, Training Manual HMS formate & HHW Kit	NIL			
8	Strengthening of existing Maternity Homes & Dispensaris (Not applicable for the present)	NIL			
				TOTAL	690,000.00

B. Saha
**Accounts & Finance
 Co-ordinator
 Bongaon Municipality**

Prasanta Bose

 CHAIRMAN
 BONGAON MUNICIPALITY

*Rs. 6.90 lakhs
 may be returned.*

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA- 67/2006/ 875

তারিখ 31.07.2007

From :- Director, SUDA

To :- The Manager,
 State Bank of India
 Salt Lake City, Kolkata-91.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Tarakeswar Municipality	431000.00	Tarakeswar
2.	Chairman, Baduria Municipality	708000.00	Baduria
3.	Chairman, Birnagar Municipality	513000.00	Birnagar
4.	Chairman, Jiaganj-Azimganj Municipality	452000.00	Jiaganj
Total		2104000.00	
(Rupees Twenty One Lakh Four Thousand) only			

(Debasis Mitra)

Joint Secretary

M.A.Department, GOWB

(C. Sircar)

Director, SUDA



Office of the councillors of
Tarakeswar Municipality

P. O. : Tarakeswar ★ Dist. : Hooghly

S. T. D.—03212

276105

PHONE : TKR 276408

278888

278889

Ref. No TM/HW-2007/1/6

Dated 10.7. 2007

From: The chairman,
Tarakeswar Municipality

11 JUL 2007



To: - The Director, SUDA,
Health wing - 'Ilgus Bhaban',
Bidhannagar, Kolkata - 91.

Sub:- Requisition of fund for community based
Primary health care service for July '07 to Sept '07.

Madam,

I am to furnish herewith the Requisition
of Fund for the period July '07 to Sept '07 for
your kind information and necessary sanction the
fund as stated in the Requisition Statement.

Encl:- Requisition Form.

Yours faithfully,
[Signature]
Chairman 10/7/07
Tarakeswar Municipality



11 JUL 2007

Tarakeswar Municipality

Tarakeswar ** Hooghly Community Based Primary Health Care Service

Requisition of fund for the period July 2007 to September 2007

Sl. No	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment	Rs. 75,000/-	09	Honorarium	Rs.45,000/-
2	Furniture	Rs.1,95,000/-	10	Salaries	Rs.18000/-
3	Construction :- (Not applicable for the present)	Nil	11	Rent	Rs. 3,000/-
	a) Sub-Centre		12	Training	Rs.10,400/- 10,000
	b) OPD cum maternity home		13	Drug	Rs. 72,000/-
	c) OPD		14	I.E.C.	Nil
4	I.E.C. & Materials	Rs. 3,000/-	15	Operating Cost (Sundries, Printing, Postage & Telephone, TA/DA etc.	Rs 10,000/-
5	Renovation Work	Rs.1,50,000/- X			
6	Baseline Survey	RS. 3,000/- X			
7	Family Schedule, Training Manual, HMIS format & HHW Kit Bag	Nil			
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)	Nil			
				Total Rs.	Rs.5,74,000/-

(Total rupees five lacks seventy four thousand only)

Fund Received - 2,22,500/-

SOE submitted - 2,17,252/-

(97.8%)
(97.8%)

Chairman
Tarakeswar Municipality
10/07/07

Office of the Municipal Councillors of Baduria
NORTH 24 PARGANAS.

Shri Susanta Ghosh
CHAIRMAN
BADURIA MUNICIPALITY
24 PARGANAS (N)



Residence
VILL & P.O. & P.S.:- BADURIA
DIST:- 24 PARGANAS (N)
PIN:- 743401

Ref No.....*332*.....

Dated, Baduria the.....*12/7/2007*
27 JUL 2007

To,
The Director,
SUDA,
Ilgus Bhavan,
HC-Block, Sector-III, Bidhannagar,
Kolkata - 700106



PO(H)
W/T

Sub :- Requisition for Fund for ~~community~~ based Primary Health Care Service.

Madam,

With due respect it is to inform you that I have received Rs. 230,000/- vide ref. no. SUDA/HEALTH/63 ULBs/06/59 dt 19/09/2006 as advance. I have spent Rs 213526/- as per prescribed guideline a sum of Rs.16474/- Balance remain in hand (detailed reconciliation attached with this letter). I would therefore request you to release Rs. 14,58,000.00 (detail requisition form of prescribed format attached with letter) to meet up the programme smoothly in due course.

Thanking you.

Yours faithfully,

Susanta Ghosh
12/7/07

Chairman
Baduria Municipality
North 24 Parganas.

RECONCILIATION STATEMENT

Particulars	Amt (Rs)
Closing Balance as per Cash Book on 30/06/2007	18,830.26
Less : Bank Interest	1,356.26
Municipal Fund given to open Bank A/C of Community Based Primary Health Care Service	1,000.00
	16,474.00

S. ————
12/7/07

Chairman
Baduria Municipality
24 Parganas. (N)

Community Based Primary Health Care Services

In 63 Non- KMA ULBs

Name of the Municipality : **BADURIA**

July

September

Requisition of fund for the period ----- to -----2007

SL NO.	ITEM OF EXPENDITURE	Expenditure (Amt. in Rs.)
	NON RECURRING	
1	Equipment	80,000.00
2	Furniture	1,60,000.00
3	Construction (Not applicable for the present) <i>* But 4 nos. of sub-centre is urgently needed.</i>	
	A) Sub-centre	
	B) OPD cum Maternity Home	
	C) OPD	
4	I.E.C & Materials (17 no. of permanent hoarding@ <i>Rs 20,000/- each)</i>	3,40,000.00 X
5	Renovation Works (Existing room of H.H.W. to be <i>repair)</i>	2,00,000.00 X
6	Base Line Survey (will be done by an agency, 17 <i>wards @ Rs 10,000/- per ward)</i>	1,70,000.00 X
7	Family Schedule, Training manual, HMIS format & HHW Kit	
8	Strengthening of existing Maternity Homes & Dispensaries (not applicable for the present) <i>* One charitable dispensary is existing, up gradation is urgently needed.</i>	
	RECURRING	
9	Honorarium For H.H.W. (3 months)	51,000.00
10	Salaries (For 3 months)	93,000.00
11	Rent (For 4 nos. of sub centre @2000.00 per month <i>for three months)</i>	24,000.00
12	Training	
13	Drug (For H.H.W. @5000.00 per month per ward <i>for three months)</i>	2,55,000.00
14	I.E.C (2 no of Mobile Mike Set @ Rs 20,000/- each)	X 40,000.00
15	Operating Cost (Sundries, Printing, Postage & Telephone, TA/DA etc) (For three months <i>@15000.00 per month)</i>	45,000.00
	TOTAL	14,58,000.00

Fund released 2,30,000/-
SOB submitted 2,15,538/- (93.7%)

Sum 14,58,000.00
12/11/07
Chairman

Baduria Municipality
North 24 Parganas.

Office of the Councillors of the Birnagar Municipality
P.O. Birnagar (Nadia)

From :

Sri Nanda Dulal Roy

Chairman, Birnagar Municipality.

Sri Partha Kumar Chatterjee

Vice-Chairman, Birnagar Municipality.



Memo No..... FOF.....

* Dated Birnagar the 24.7.2007

To

The Director
State Urban Development Agency
Health Wings, ILGUS BHAWAN,
Salt lake city, Sector-III.
Kolkata: 700 091,

27 JUL 2007



Sir,


Birnagar Municipality received a sum of
Rs. 2,19,000/- (Rupees two lakh nineteen thousand) only
for the purpose of Health Care Service of which a sum
of Rs. 1,82,254/- (Rupees one lakh eighty two thousand
two hundred fifty four) only has been spent for the
purpose. At present there is only Rs. 36,746/- (Rupees
thirty six thousand seven hundred forty six) only in
the fund.

We would request you kindly to arrange to release
for the fund at an early date.

We are enclosing herewith the requisition of fund
for your further necessary action.

Thanking you,

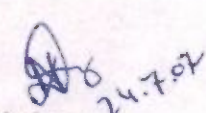
Yours faithfully,


24.7.07
Chairman
Birnagar Municipality

BIRNAGAR MUNICIPALITY

Requisition of fund for the period July to Sept		2007
SI no.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring	
1	Equipment	75,000/-
2	Furniture	1,90,000/-
3	Construction	
	(Not applicable for present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
4	I.E.C. & Materials	
5	Renovation works	
6	Base Line survey	
7	Family Schedule, Training manual, HMIS format & HHW Kit	
8	Strengthening of existing Maternity Home & Dispensaries	
	(Not applicable for present)	
	Recurring	
9	Honorarium	44,800/- 44,000/-
10	Salaries	60,000/-
11	Rent	
12	Training	
13	Drug	1,44,000/-
14	I.E.C.	
15	Operating cost (sundries, printing postage & telephone, TA /DA etc.	
	Total	5,13,800/- ✓ 5,13,000/-




 24.7.07
 Chairman
 Birnagar Municipality

Fund Released - 2019 Lakhs.
 SOE Submitted - 182254 (83.2%)

Office of the *Councillors*
Jiaganj - Azimganj Municipality

Azimganj, Murshidabad

Phone No - (03483) 253222

Memo No - 01/EN/XXI/JAM

Dt. 8.7.07

To
The Director,
State Urban Development Agency
Health Wing Ilgus Bhawan,
HC Block, Sector III Bidhannagar,
Kolkata- 700091.

Sub: Requisition of fund for implementation of
CBPHC's in Jiaganj-Azimganj Municipality-
for the period from 1st June to 31st Aug.07

Respected Madam,

I am to forward herewith requisition of fund in the prescribed proforma for the period 1st June to 31st Aug.2007 in favour of Jiaganj-Azimganj Municipality for implementation of CBPHC's with the request to make allotement of fund urgently.

Yours faithfully,

Chairman
Jiaganj- Azimganj Municipality

Dated 08.7.07

Memo No. 01/EN/XXI/JAM

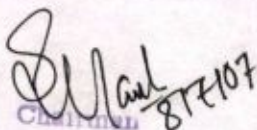
Copy forwarded to

1. Director of Local Bodies, Purta Bhawan, Saltlake.
2. Joint Secy. Municipal Affairs Deptt.
3. D. M. Murshidabad.
4. Guard File of Chairman.

J. Maul
Chairman, 8/7/07
Jiaganj- Azimganj Municipality.

REQUISITION FOR the period from 1st June to August 2007
as per proforma given below. ~~90,000=00~~

SL. NO	ITEM OF EXPENDITURE	EXPENDITURE	SL. NO.	ITEM OF EXPENDITURE	EXPENDITURE
	Non Recuring			Recurring	
1.	Equipment	1,00,000-	9	Honorium	51,000=00
2.	Furniture	80,000-	10	Salaries.	90,000=00
3	Construction		11	Rent	12,000=00
	a. Sub- centre	1,20,000=00	12	Training	27,000=00
	b. OPD cum maternity HOME		13	Drug	80,000=00
	c. OPD		14	IEC	
4.	IEC & materials		15	Operative cost (sundries) printing, postage, telephone	12,000=00
5.	Renovation works				
6.	Base line survey				
7	Family schedule Training manual HMS format & HHW kit				
8.	Strengthening of existing maternity home & Dispensaries.	nil			
		RS 1,80,000=00			RS. 4,52,000=00


 8/7/07 ✓
 Chairman
 Tegenj-Azimganj Municipalite ✓

Office of the Councillors
Jiaganj-Azimganj Municipality
P.O. Azimganj Dist. Murshidabad

Consolidated pay sheet for the month of June '07 to August
2007 for the CBPHC's of
Jiaganj- Azimganj Municipality

Sl No.	Name	Designation	
1.	Dr. J.N.Paul.	Medical Officer	6,000/=
2.	Biswajit Shee	Accounts assitant	5,000/=
3.	Sanjib Kr. Nandi	Computer Assistant	5,000/=
4.	Jayanta Chakrabarty	S.K.Clerk	5,000/=
5.	Partha Kr. Das.	Health Assistant	5,000/=

Total Rs.26,000 X 3 = 78,000/= required.

SUN
Chairman
28-7-07

Jiaganj-Azimganj Municipality

Chairman

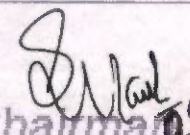
Jiaganj Azimganj Municipality

Office of the
Jiaganj-Ajimganj Municipality
P.O: Agimganj. Dist: MSD.

List of HHW's Honarium for CBPHC's under Jiaganj-Ajimganj Municipality

1.	Sonali Bhattacharyya.	Ward No. 1.
2.	Shibani Das.	Ward No. 2.
3.	Lipika Ghosh.	Ward No. 3.
4.	Archana Dhar.	Ward No. 4.
5.	Reba Ghosh	Ward No. 5.
6.	Rita Dey(Das).	Ward No. 6.
7.	Archana Sarkar.	Ward No. 7.
8.	Sonali Halder.	Ward No. 8.
9.	Rina Roy.	Ward No. 9.
10.	Rakhi Mani.	Ward No. 10.
11.	Joyeta Mahata.	Ward No. 11.
12.	Sarathi Magndal.	Ward No. 12.
13.	Mita Saha (Das).	Ward No. 13.
14.	Mina Chanda(Mandal).	Ward No. 14.
15.	Anita Mazumder.	Ward No. 15.
16.	Chandana Das.	Ward No. 16.
17.	Tulshi Saha.	Ward No. 17.

Rs. 1000/- (Rupees one thousand) only per month X 17 X 3 month = Rs. 51,000/=


Chairman **08-7-07**
Jiaganj-Azimganj Municipality
Chairman
Agimganj Municipality



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 849

তারিখ 27.07.2007

From : Director, SUDA

To : The Manager.
State Bank of India,
Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Draft as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Old Malda Municipality	3,89,000.00	Malda
Total		3,89,000.00	
(Rupees Three Lakh Eighty Nine Thousand only)			

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

(C. Sircar)
Director
SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA-67/2006/ 849

তারিখ 27.07.2007

From : Director, SUDA

To : The Manager.
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Draft as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Old Malda Municipality	3,89,000.00	Malda
Total		3,89,000.00	
(Rupees Three Lakh Eighty Nine Thousand only)			

(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB

(C.Sircar)
 Director
 SUDA



**Office of the
Councillors Old Malda Municipality**

P.O. - Old Malda, Dist - Malda

STD : 03512
Chairman Off.: 260235
Resi.: 260253
Cell No.: 9434166085
Vice-Chairperson Off.: 260643
Resi.: 260207
Cell No.: 9434303460
Executive Officer : 260036
Fax : 260235
Fax : 260036

Sri Biswanath Sukul
Chairman
OLD MALDA MUNICIPALITY

Smt. Tripti Pandey
Vice-Chairperson
OLD MALDA MUNICIPALITY



Memo No.: 629

Date: 17.07.2007

To
The Director,
State Urban Development Agency
Salt Lake City, Kolkata-700106

P.O. (H)
①
2007

Sub :- Requisit of fund for Rs.4.89 lacs - Reg.
Madam,

A sum of Rs.4.89 lacs (Rupees four lacs eighty nine thousand) only is being requisitioned towards the implementation of ~~ExRx Rax~~ Community Based Primary Health Care Services project in the format duly prescribed on account of 73.33% of the fund for Rs.2,47,000/- (Rupees two lacs forty seven thousand) only has been spent.

As such I would request you to kindly arrange to release a sum of Rs.4.89 lacs (Rupees four lacs eighty ~~nine~~ nine thousand) only at the earliest.

Yours faithfully,

*Fund release
2.47 lacs*

[Signature]
Chairman

Old Malda Municipality.

SOE submitted upto March - 9555
April - 5837
May - 34800
June - 130955

*Rs. 3.89 lacs by
may be cleared.*

181147 (73.33%)
Total

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং..... SUDA-67/2006/ 810

তারিখ..... 23.07.2007

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir.

You are requested to kindly arrange for preparation of the following Account Payee Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Taki Municipality	4,30,000.00	Basirhat
2.	Chairman, Haldia Municipality	8,00,000.00	Haldia Port
3.	Chairman, Jhalda Municipality	1,60,000.00	Jhalda
Total		13,90,000.00	
(Rupees Thirteen Lakh Ninty Thousand) only			

(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB

(C.Sircar)
 Director
 SUDA

ঝালদা পৌরসভার কাউন্সিলারগণের কার্যালয়

ঝালদা, পুরুলিয়া

OFFICE OF THE COUNCILOR'S

JHALDA MUNICIPALITY

P.O.—JHALDA, Dist—Purulia (W. B.)

দূরভাষ : ০৩২৫৪
২৫৫-২১৯

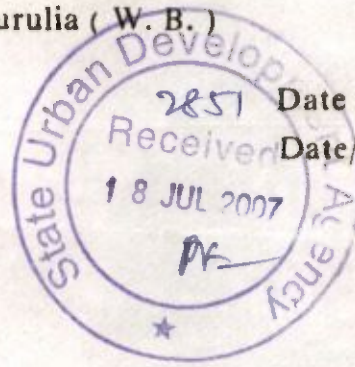
Ph : 03254
255-219

Memo No./পত্রাঙ্ক নং : 237/JM

Ref. No./স্মারক নং :

To
The Director,
SUDA,
ILGUS Bhawan,
HC, Sector III,
Bidhan Nagar,
Kolkata -700091

AM/H
18/7



19 JUL 2007

Subject: - Submission of Statement of Expenditure (SOE), Utilisation Certificate (UC), and Requisition of Fund.

Sir,

I am submitting herewith the SOE, UC and Requisition of Fund of Community Based Primary Health Care Services for favour of your needful action.


Chairman,
Jhalda Municipality

Enclosed: -

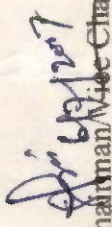

- SOE
- UC
- Requisition of Fund.

Fund Released - 2.13 Lakh
SOE Submitted - 153750/- (72%)

Sept, 2007
Requisition of Fund of the Period July 2007 to March 2008

Sl No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl No	Item of Expenditure	Expenditure (Amount in Rs.)
		40,000.00		Recurring	
1	Equipment		9	Honorarium	15,000.00
2	Furniture		10	Salaries	1,10,000.00
3	Construction (Not applicable for the present)		11	Rent	
	a) Sub-Centre		12	Training	25,000.00
	b) OPD cum Maternity Home		13	Drug	
	c) OPD		14	I.E.C.	
4	I.E.C. & Materials		15	Operating Cost (Sundries, Printing, Postage & Telephone, TA/DA etc.)	10,000.00
5	Renovation Works				
6	Base Line Survey				
7	Family Schedule, Training manual, HMS format & HHW kit				
8	Strengthening of existing Maternity Homes & Dispensaries (Not applicable for the present)				
				Total	2,00,000.00

Rs. 1.60 Lakhs - Sep 07
 1,60,000/-
 Mr. P. K. ...
 Mr. ...
 Mr. ...


 Chairman, Jhalda Municipality




Office of the
Haldia Municipality

Dr. B. R. Ambedkar Bhawan, Administrative Building, City Centre,
P.O. - Debhog, Haldia, Purba Medinipur, West Bengal.

☎ : 03224-252996 / 252997
252644 / 253410 / 252718
Fax : 252154

Memo No. : 1690/HM/Fund/07

Date : 3.07.07

The Director,
State Urban Development Agency,
Health Wing,
ILGUS Bhavan, H-C Block, Sector-III,
Bidhannagar, Kolkata-700091.



10 JUL 2007

Sub- Requisition of fund.


Madam,

With reference to above, I am submitting herewith the requisition of fund under CBPHCS for the month of July'07 to December'07 for your kind perusal.

Thanking you,

Yours faithfully,

Encl:- As stated above


Executive Officer
Haldia Municipality





HALDIA MUNICIPALITY
City Centre : Debhog,
Haldia : Purba Medinipur

Requisition of fund for the period Jul ' 07 to Dec' 2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non-Recurring		
1	Equipment Training-Rs. 50000, M S Cell-Rs.120000. Sub Centre-Rs.225000	395000
2	Furniture M S Cell-Rs. 80000, Sub Centre-Rs. 180000.	260000
3	Construction (Not Applicable for the present)	0
	a) Sub-Centre	0
	b) OPD cum Maternity Home	0
	c) OPD	0
4	I.E.C & Meterials	0
5	Renovation works	0
6	Base Line Survey	0
7	Family Schedule Training manual, HMIS format & HHW Kit	0
8	Strengthening of existing Maternity Homes & Dispensaries (not applicable for the present)	0
SUB TOTAL (NON-RECURRING)		655000
Recurring for 3 months		
9	Honorarium	270000
10	Salaries	0
11	Rent	0
12	Training	0
13	Drug	0
14	I.E.C.	0
15	Operating Cost (Sundries, Printing, Postage & Telephone, T.A. / D.A. etc)	20000
SUB TOTAL (RECURRING)		290000
GRAND TOTAL (NON-RECURRING + RECURRING)		945000

135000

10,000

8,50,000/-

Amount Released = 2,186,000/-

SCOPES Submitted - 252402/- (88%)

gnd
Executive Officer,
Haldia Municipality
Haldia, Purba Medinipur

MKN.
12.7-07

Fax & Office (953217) 234 481 / 233 324
Res: (953217) 233 285
Guest House (953217) 233 328
Night Shelter (953217) 234 007

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI

P.O. : TAKI * DIST. : NORTH 24 PARGANAS

No. 414/T.M.

Dated, Taki 03-07-2007

From: Dilip K. Banerjee

Chairman

Taki Municipality

To :

The Project Director,
SUDA, Health Wing,
H. C. Block, Sector - III
ILGUS BHAVAN,
Bidhannagar,
Kol- 700091



Sub : STATEMENT OF EXPENDITURES

Sir,

As per your letter no.-SUDA-Health/63 ULBS/06/58 dated-19-09-2006 Statement of Expenditure in connection with Details of Expenditure and Xerox copies of payment vouchers are enclosed herewith for your kind information.

As per your guideline I have been already spent requisite 70% and more from first allotted instalment.

In this connection I would request you the next instalment be released for properly implementation of the Programme.

Thanking you,

Yours faithfully,

(D.K. Banerjee)
CHAIRMAN
Taki Municipality
&
PRESIDENT
Taki Pura Health &
Family Welfare Samity

Talei

Requisition of fund for the period JULY to SEPTEMBER,2007
[For 4 (four) Sub-Centres]

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	<u>Non-Recurring</u>			<u>Recurring</u>	
1.*	Equipment	1,00,000.00	9.*	Honorarium	49,600.00
2.*	Furniture	80,000.00	10.*	Salaries	60,000.00
3.	Construction Not applicable for the present		11.	Rent	
	a) Sub-Center		12.	Training	
	b) OPD cum Maternity Home		13.*	Drug	96,000.00
	c) OPD		14.*	I.E.C.	15,000.00
4.	I.E.C. & Materials		15.*	Operating cost (Sundries, printing, postage & telephone, TA/DA etc.	30,000.00
5.	Renovation Works				
6.	Base Line Survey				
7.	Family Schedule, Training manual, HMIS format & HHW kit.				
8.	Strengthening of existing Maternity home & Dispensaries. Not applicable for the present)				
				TOTAL =	4,30,600.00

- 1.* Per Sub-Centres allotted for equipment @ Rs.25,000.00
- 2.* Per Sub-Centres allotted for furniture @ Rs.20,000.00
- 9.* Honorarium for HHWs 16 (Nos.) @ Rs. 1,000.00 per month + 3 days with effect from 27th June,2007
- 13. Drugs quarterly @Rs.24,000.00 per Sub-Centres for 4 Sub-Centres.

Fund released - 2.27 lacs.
SOB Srinivas - 168603 (74.2)

[Signature]
Signature of Chairman / Vice-Chairman



Office of the Councillors
Contai Municipality

S.T.D : 03220
255017/255027
257377/255312/
257078
FAX : 255599

P.O. - Contai * Dist - Purba Medinipur

No ..CM.....295/geml-404

Date .13.06.07

From : Chairman / Vice-Chairman / Councillor / Executive Officer / Contai Municipality

To,
The Director,
State Urban Development Agency,
ILGUS BHAVAN,
HC-Block, Sector- III,
Bidhannagar, Kolkata- 700 091.



20 JUN 2007

Sub :- Submission of utilization Certificate of HHWs Account.

Sir,

I am submitting herewith the SOE & Utilization Certificate of HHWs Account under CBPHCS for your kind information and taking further action.

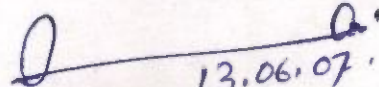
Hence, I would request you to release further grant as stated statement of Demand i.e. Rs.- 4,43,520.00 (Rupees Four lacks forty three thousand five hundred and twenty)only upto August '07 at your earliest for the expedite for execute the said programme.

Thanking you.

Yours faithfully,

Encl :- As Stated.




13.06.07

(S.Adhikari.)
Chairman,
Contai Municipality
Chairman,
Contai Municipality

Requisition of fund for the period June 2007- August 2007.

Sl. No	Item of expenditure	Expenditure(Amount in Rs.)	Sl.No.	Item of expenditure	Expenditure(Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment:		9	Honorarium	1,02,000 /-
	a) for Training		10	Salaries	78,000 /-
	b) Management & Supervision Cell (Sub-Centre) 6 Nos.	90,000 /-	11	Rent(Sub-centre)	18,000 /-
	Furniture:		12	Training	52,950 /-
	a) for Training (due)	50,000 /-	13	Drug.	
2	b) for Management & Supervision Cell (due)	80,000 /-	14	LEC	
3	construction:(Not applicable for the present)		15	Operating cost(Sundries,printing, postage&Tele Phone,T.A/D.A etc.)	10,000 /-
	a)Sub-Centre				
	b)OPD cum Maternity Home				
	c)OPD				
4	LEC & Materials				
5	Renovation Works				
6	Base Line Survey				
7	Manual,HMS format& HHW				
8	Strengthening of existing Maternity Homes & Dispensaries(Not applicable for the present.				
				Total :-	4,80,950 /-

~~37430~~
 - 37430
 (in hand)
 15520
 15570 (500)

~~4,80,950~~
 4,43,500 /-
 13.06.07

Signature of the Chairman/ Vice-Chairman.

Chairman.
Contai Municipality



Fund received 264000 /-
 SOE submitted. 226570 /-
 (85.8%)

OFFICE OF THE MUNICIPAL COUNCILLORS OF BASIRHAT

North 24 Parganas

Ref. No.762

From :

Date. 25.11.2007.....

Sri Narayan Mukherjee
Chairman, Basirhat Municipality.

To
The Director
SUD A, (Health Wing)
Ugno Bhawan
Kolkata - 91

Sub:- Requisition of Fund for HSA Scheme
from July 2007 to Sept, 2007.

Sir,

I am to submit a list showing
requisition of fund for HSA Scheme. for the
period from July 2007 to September, 2007.

I would request you to allot fund
in favour of this municipality at your earliest
convenience.

Yours faithfully,

Enclos:- As stated }
above }

Chairman,
BASIRHAT MUNICIPALITY

OFFICE OF THE MUNICIPAL COUNCILLORS OF BASIRHAT

NORTH 24 PARGANAS

Requisition of fund for the period July 2007 to Sept. 2007

Sl. no.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment	120000.00	9	Honorarium	114000
2	Furniture		10	Salaries	112000
3	Construction (Not applicable for the present)		11	Rent	
	a) Sub-Centre		12	Training	
	b) OPD cum Maternity Home		13	Drug for 6 months	384000
	c) OPD		14	I.E.C.	768000.00
4	L.E.C. & Materials		15	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.)	30000.00
5	Renovation Works				
6	Base Line Survey				
7	Family Schedule, Training manual, HMIS format & HHW Kit				
9	Strengthening of existing Maternity Homes & Dispensaries (not applicable for the present)				
				Total	1144500.00

TA & DA 760000.00

Mungo Mungo

Chairman/ Vs Chairperson


**Chairman,
BASIRHAT MUNICIPALITY**

Fund returned - 306000.00
SOE submitted - 280695.00
(91.74%)

Requisition of fund for the period June to August 2007
Name of the Municipality : GHATAL

Sl.No.	Item of Expenditure	Expenditure	Sl.No.	Item of Expenditure	Expenditure
	Non - Recurring	Amount in Rs.		Recurring	Amount in Rs.
1	Equipment	120000.00	9	Honorarium	51000.00
2	Furniture		10	Salaries	
3	Construction :		11	Rent	
	a) Sub - Centre		12	Training	
	b) OPD Cum Maternity Home		13	Drug	
	c) OPD		14	I.E.C.	
4	I.E.C. & Materials		15	Operating Cost (Sundries	40000.00
5	Renovation Works			Printing, Postage &	30500.00
6	Base Line Survey			Telephone, TA/DA etc.)	
7	Family Schedule, Training				
	manual, HMIS format & HHW KIT				
8	Strengthening of existing				
	Maternity Homes & Dispensaries				
				TOTAL	211000.00

Fund for an amount of
Rs. 2.01 lakhs may be
released.
19.6.07


Signature of Chairman
Ghatal Municipality
Chairman
Ghatal Municipality

Fund Released: 230000/-
SOE Submitted upto Mar 07 →
Apr. to May 07 →

115396/-
76500/-
191896 (83.4%)

Balance in hand. - 38104/-

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নংSUDA-67/2006/ 489

তারিখ13:06:2007.....

From : Director, SUDA

To : The Manager,
 State Bank of India,
 Salt Lake City, Kolkata - 700 091.

Sub : Preparation of Account Payee Demand Draft
 Current Account No. 01000050203.

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Draft as per details given below, debiting the amount from this office Current Account No. 01000050203 lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
1.	Chairman, Kandi Municipality	2,46,000.00	Kandi
Total		2,46,000.00	
(Rupees Two Lakh Forty Six Thousand) only			

(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB

(C.Sircar)
 Director
 SUDA

Community Based Primary Health Care Service in 63 Nos. KMA- ULBs.
Statement of Requirement

Name of the Municipality: - KANDI MUNICIPALITY

For the month of April, May & June-2007

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
Non -Recurring		
01	Equipment	120,000.00
02	Furniture	
03	Construction : (Not applicable for the present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
04	I.E.C. & Materials	* 5000.00.
05	Renovation works	
06	Base line Survey	
07	Family schedule, Training Manual, HMIS format & HHW Kit bag	
08	Strengthening of existing Maternity Home & Dispensaries (Not applicable for the present)	
Recurring		
09	Honorarium	51,000.00
10	Salaries	
11	Rent	
12	Training	50,000.00
13	Drug	
14	I.E.C.	
15	Operating Cost (sundries, Printing, Postage & Telephone, TA/DA etc.	25,000.00
Total		251,000.00

*Rs. 2.46 lacs
 may be admissible
 12.6.07*

- 5000.00
 256000.00

 Chairman/Vice-Chairman
 Kandi Municipality.

**OFFICE OF THE COUNCILLORS OF
TAHERPUR NOTIFIED AREA AUTHORITY
TAHERPUR NADIA.**

Memo No...

Dated

Requisition of fund for the period April to June 2007

Sl. No	Item of expenditure	Amount Rs.	Sl. No	Item of expenditure	Amount Rs.
Non-Recurring			Recurring		
1.	Equipment	35,000.00	9	Honorarium	13,000.00
2	Furniture	20,000.00	10	Salaries	26,000.00
3	Construction		11	Rent	NIL
a)	Sub-Centre		12	Training	
b)	OPD cum Maternity Home		13	Drug	
c)	OPD		14	I.E.C.	
4.	I.E.C. & Materials		15	Operating cost (Sundries, printing, postage & telephone, TA/DA etc.)	2,000.00
5.	Renovation Works				
6.	Baseline Survey	5,000.00			
7	Family Schedule, Training manual, HMIS format & HHW kit bag.				
8.	Strengthening of existing Maternity Homes & Dispensaries				
				Total Rs.	1,01,000.00

Chairman
TAHERPUR NOTIFIED AREA AUTHORITY
CHAIRMAN
Taherpur, Nadia

Taherpur Notified Area Authority
Taherpur, Nadia



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নংSUDA-67/2006/ 349

তারিখ22.05.2007.....

From :- Director, SUDA

To :- The Manager,
State Bank of India
Salt Lake City, Kolkata-91.

**Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203**

Community Based Primary Health Care Services

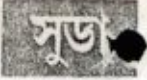
Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Kaliaganj Municipality	242000.00	Kaliaganj
	Total	242000.00	
(Rupees Two Lakh Forty Two Thousand) only			

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

(C. Sircar)
Director, SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
“ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA- 67/2006/ 345

তারিখ 22.05.2007

From :- Director, SUDA

To :- The Manager,
State Bank of India
Salt Lake City, Kolkata-91.


Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

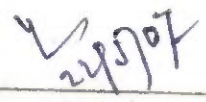
Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Ramjibanpur Municipality	266000.00	Ghatal
Total		266000.00	
(Rupees Two Lakh Sixty Six Thousand) only			


(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB


(C. Sircar)
Director, SUDA

OFFICE OF THE BOARD OF COUNCILLORS
KALIYAGANJ MUNICIPALITY
KALIYAGANJ (733129) :: DIST.-UTTAR DINAJPUR

M.I.E. to examine the SOE, so that next fund can be released.
18.4.07

Memo No. 612/H.H.U./07

Date 13/4/07

From : Chairman
Kaliyaganj Municipality.

18 APR 2007



To : The Director
State Urban Development Agency
"ILGUS BHAVAN"
H.C.Block, Sector-III
Bidhannagar
Kolkata-700091

PO(H)
17/4



Sub: Allotment of Fund for Community Based Primary Health Care Service of Kaliyaganj Municipality.

Madam,

With reference to the above, this is to inform you that HHW programme under Community Based Primary Health Care Service of Kaliyaganj Municipality is going well. For smooth functioning of the programme the following Fund is necessary.

Please allot the Fund and oblige.

1. Honorium for 17 Nos. HH worker - $1000 \times 17 = \text{Rs. } 17,000 = 00$
for six months i.e. April -07 to September-07 $\text{Rs. } 17,000 \times 6 = \text{Rs. } 1,02,000 = 00$
2. For purchasing of 2 Nos. Computer & Monitor, UPS, Printer-
 $\text{Rs. } 60,000 \times 2 = \text{Rs. } 1,20,000 = 00$
3. Medicine purchase (ORS, Nirodh, C.C.P., Iron Pholic Acid tablet, Paracetamol, Norfloxacin etc.)
 $\text{Rs. } 80,000 = 00$ X
4. for IEC purpose
op. cost $\text{Rs. } 20,000 = 00$ ✓

Rs. 3,22,000 - 00

(Rupees Three Lakh Twenty two thousand) only

- 80,000

2,42,000

Yours faithfully

(Signature)
13.4.07
(A.K.De Sarkar)
Chairman
Kaliyaganj Municipality.

Fund Released 230000/-
SOE Submitted 206637/-
Balance in hand 23363/-
App. 90% VC Submitted. Hence further allotment may be released.
MKM
30/4/07.

Requisition of fund for the period 1.4.07 To 30.6., 2007

Sl. No.	Item of Expenditure	Required fund (Amount in Rs.)
	Non-Recurring	
1.	Equipment	1,20,000 = 00
2.	Furniture	
3.	Construction : (Not applicable for the present)	
	a) Sub-Centre	
	b) OPD cum Maternity Home	
	c) OPD	
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 (Not applicable for the present)	
	Recurring	
9.	Honorarium	66,000 = 00
10.	Salaries	
11.	Rent	
12.	Training	50,000 = 00
13.	Drug	
14.	I.E.C.	
15.	Operating Cost (Sundries, printing, postage & telephone, TA / DA etc.) + Contingency	56,000 = 00
	TOTAL	2,92,600 = 00



Signature of Chairman / Vice-Chairman
 Chairman,
 Ramjibonpur Municipality

Office of the Councillors of :

By Speed Post

Mekliganj Municipality

P.O.: Mekliganj, Dist.: CoochBehar

Phone No.: (03584) 255 249, 255 480, 255 458, Fax No.: (03584) 255 249

5 APR 2007

Memo no. 01/XIV-CEPHCS/07-08

Fun 14000=00
Comp 59000=00
Trg 59000=00
HWO 27000=00
O/C 21000=00
180000=00

Date 03/04/07

FROM :- The Chairman
Mekliganj Municipality
Mekliganj: Cooch Behar.

TO :- The Director,
State Urban Development Agency.
(Health Wing)
ILGUS Ehaban, Kolkata-700091.

M(H)
L/H
5/4
Rs. 1.80 lakh
LC sub. am.
mmj

Sub :- Requisition of Fund to required in Second instalment under CEPHCS.

Madam,

Reference to the SOE for the month of January to March, 07, status on Fund allotment upto March, 07, monthly summary sheet on SOE for the period from January to March, 07 and UC for 1st instalment of Fund submitted to your office on 16.03.2007 (A bunch containing 18 sheets), I am further submitting the details of the requisition for 2nd instalment of Fund as below.

1. Purchase of 17 plastic chairs (Arms) for Training	- Rs. 4,930=00	(F)
2. Purchase of two Compaq Presario SG-2000 Computer with 17" colour Monitor.	- Rs. 59,400=00	(E)
3. Purchase of three litter Bin	Rs. 1,200=00	(F)
4. Expenditure on Mobility Support - 17X45X20	Rs. 15,300=00	(F)
5. Training expenses (Tea + tiffin) in course of training 17 X 30 X 45	Rs. 22,950=00	(F)
6. Training fees - 90 session X 200/-	Rs. 18,000=00	(F)
7. Purchase of Training materials - Rs.300/- X 12	Rs. 3,600=00	(F)
8. Purchase of water Purifier	Rs. 8,000=00	(F)
9. Contingency expenses	Rs. 10,000=00	(F)
10. Travelling Expenses	Rs. 11,000=00	(F)
11. Monthly Remuneration of HHWS on appointment after training for a period of 12 months. (Rs. 1000/- X 9 X 12)	Rs. 108,000=00	(F)
Total		Rs. 262,380=00
Less - Fund available in the Bank A/C.....		Rs. 5,884=00
Total Fund required		Rs. 2,56,496=00

The DD in favour of the undersigned for the above-mentioned amount may be sent early.

Yours faithfully,

Fund Released 202000/-
SOE Submitted 496116/-
Balance in hand 5884/-

Chairman
Mekliganj Municipality
Mekliganj: Cooch Behar.

MMJ
8/5/07

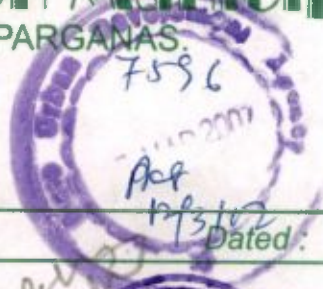
7

STD Code No. : 03215
Phone : 255021
Fax : 257641

Office of the Bongaon Municipality

BONGAON, NORTH 24 PARGANAS.

SRI PRASANTA BALA
Chairman



Rs. 2.55 lakhs
may be released
Equip. - 1.20 lakhs
Hono. - 1.35 "

Ref. No. : Memo no B.M. 258



PO (H)
143

13 MAR 2007

To
The Director, SUDA.,
"Health Wing", ILGUA BHAVAN,
H-C Block, Sector-III.,
Bidhannagar/Kolkata-700091.

Sub: Requisition for the funds on Community Based Primary Health Care Service./

Sir,

As per your letter Ref-No-SUDA-Health/63ULBs/06/271(10) dt. 26.2.07, please alloted the funds of the amount of Rs.1,55,100/- in connection with the programme on Community Based Primary Health Care Service HHWS Training.

The amount of Rs.1,20,000/- for the purchase of 2 sets of Computer, Monitor, UPS, Printer and 1 set of Fax Machine.

The amount of Rs.1,35,000/- for the honorarium of the 34 HHWS for 3 months (May'07 to July'07).

The statement of Expenditure to be submit later on after completion of the programme.

Hope you will take necessary action and oblige.

Thanking you.

Yours faithfully,
Prasanta Bala

Chairman,
Bongaon Municipality.



GANGARAMPUR MUNICIPALITY
GANGARAMPUR D. DINAJPUR

Requisition of Fund for the period 01/04/07 To 30/09/07

Rs. 2.60 lakhs may
be released.
Gangarampur

Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)	Sl. No.	Item of Expenditure	Expenditure (Amount in Rs.)
	Non-Recurring			Recurring	
1	Equipment		8	Honorarium of 3 month 54000	92,000.00
2	Furniture		10	Salaries 91000	128,000.00
3	Construction (Not applicable for the present)		11	Rent	X 24,000.00
	a) Sub-Centre		12	Training	✓ 94,060.00
	b) OPD cum Maternity Home		13	Drug	
			14	I.E.C.	X 18,000.00
	c) OPD		15	Operatin Cost(Sundries, printing, postage & telephone, TA / DA etc.)	✓ 20,000.00
4	I.E.C. Materials				
5	Renovation Works				
6	Base Line Survey				
7	Family Schedule, Training mannual, HMS Format & HHW Kit				
8	Strengthening of existing Maternity Homes & Dispenseries (Not applicable for the period)				
				Total	354,060.00

2,60,000

Memo No 180 /CHS/06

Date 03.05.07

Submitted to:
Director, SUDA(Health Wing),
Reference to our Memo No.104/CHS/06 dt.25/04/07

Bshank
Chairman 3.5.07
Gangarampur Municipality
Gangarampur, D. Dinajpur

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ
 “ILGUS BHAVAN”, H-C Block, Sector-III, Bidhannagar, Kolkata 700 106, West Bengal

ক্রমিক নং SUDA- 67/2006/ 1897

তারিখ 23.02.2007

From :- Director, SUDA

To :- The Manager,
 State Bank of India
 Salt Lake City, Kolkata-91.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Kulti Municipality	373000.00	Kulti
Total		373000.00	
(Rupees Three Lakhs Seventy Three Thousand) only			

(Debasis Mitra)
 Joint Secretary
 M.A.Department, GOWB

(C. Sircar)
 Director, SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ

"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নংSUDA-67/2006/1514

তারিখ28.12.2006

From :- Financial Adviser, SUDA

To :- The Manager,
State Bank of India
Salt Lake City, Kolkata-91.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

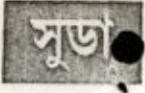
Sl No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Diamond Harbour Municipality	227000.00	Diamond Harbour
Total		227000.00	
(Rupees Two Lakhs Twenty Seven Thousand) only			

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

(S.K. Bhattacharyya)
Financial Adviser
SUDA

দূরভাষ : ৩৫৮ ৬৪০৩/৬৪২১/৫৭৬৭, ফ্যাক্স : ৩৫৮ ৫৮০০

Tel : 358 6403/6421/5767, Fax : 358 5800, E.Mail : dirsuda@cal 3.vsnl.net.in



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ

"ILGUS BHAVAN" H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নংSUDA-67/2006/1514

তারিখ28.12.2006

From :- Financial Adviser, SUDA

To :- The Manager,
State Bank of India
Salt Lake City, Kolkata-91.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

Community Based Primary Health Care Services

Sir,

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community Based Primary Health Care Services.

Sl. No	Name of Payee	Amount (In Rs.)	SBI Branch
1.	Chairman, Diamond Harbour Municipality	227000.00	Diamond Harbour
Total		227000.00	
(Rupees Two Lakhs Twenty Seven Thousand) only			

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

(S.K. Bhattacharyya)
Financial Adviser
SUDA

দূরভাষ : ৩৫৮ ৬৪০৩/৬৪২১/৫৭৬৭, ফ্যাক্স : ৩৫৮ ৫৮০০

Tel : 358 6403/6421/5767, Fax : 358 5800, E.Mail : dirsuda@cal 3.vsnl.net.in

রাজ্য নগর উন্নয়ন সংস্থা
STATE URBAN DEVELOPMENT AGENCY

"ইলগাস: ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ
"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নং SUDA- 67/2006/ 1358

তারিখ 30
29.11.2006

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake,
Kolkata.

SUB: Request for withdrawal of stop payment of Bank draft
Nos.319903 dt.14.09.2006 for Rs.3,37,000/-, No.320085
dt.21.09.2006 for Rs.19,440/- and No.319854 dt.13.09.2006
for Rs.1,31,112/- respectively drawn in favour of Chairman,
Santipur Municipality

Sir,

This is to inform you that we had requested you for 'Stop payment' of the above mentioned bank drafts vide our Memo No.SUDA-67/2006/1105 dt.19.10.2006.

Now, Chairman, Santipur Municipality has informed vide ref. No.2785/1/24 dt.27.10.2006 that the above mentioned bank drafts are in possession of the municipality. The municipality has also requested us to withdraw the 'non-stop' payment with respect to the above mentioned bank drafts.

I would, therefore request you for withdrawal of 'stop payment' with respect to the above mentioned bank drafts.

Yours faithfully,

Encl: Copy of ref. No.2785/1/24 dt.27.10.2004
Of Santipur Municipality

Director, SUDA

SUDA- 67/2006/ 1358/1(2)

30
29.11.2006

Copy forwarded for information & necessary action to :

- 1) The Manager, State Bank of India, Santipur branch, Santipur
- 2) The Chairman, Santipur Municipality

Director, SUDA

০/০

Joy/29.11.2006

দূরভাষ : ৩৫৮ ৬৪০৩/৬৪২১/৫৭৬৭, ফ্যাক্স : ৩৫৮ ৫৮০০

Tel : 358 6403/6421/5767, Fax : 358 5800, E.Mail : dirsuda@cal 3.vsnl.net.in

Ajoy De

Member, W. B. Legislative Assembly
Chairman, Santipur Municipality



CODE - 953472

Phone : Office - 78029

Fax : 77170

Resi (78003

78262

Chamber - 78111

Ref. No. 2985/1124

Date 27/10/06

To
The Director,
State Urban Development Agency (SUDA),
Govt. of West Bengal,
ILGUS BHAVAN,
H.C. Block, Sector-III,
Bidhannagar,
Kolkata - 700 091.



Ref. : Our previous Memo.Nos.- 2937/4/24, dt. 18.10.2006 and
2949/1/24 dt. 19.10.06.

Sir,

In inviting reference to the above memo. I am to submit the following facts for your kind information that Sri Tapas Kumar Dhani, an employee of this Municipality, receive the following Demand Drafts, bearing nos. (1) D.D.No. 319903, dt. amounting to Rs. 3,37,000/- (2) D.D.No. 320085, dt. 21.9.06, amounting to Rs. 19,440/- and (3) D.D.No. 319854, dt. 13.9.06 amounting to Rs. 1,31,112/- respectively from your office on 17.10.06 but the same was missing from the possession of the said employee, on his way to Sealdah Rly. Station, by Bus.

Now, I am to inform you that the aforesaid articles have since been received by this Municipality on 23.10.2006 and the same is in possession of this Municipality.

Under the above circumstances, you are therefore requested to take necessary action in the matter as you deem fit and proper.

Yours faithfully,

Ajoy De
26.10.06

Chairman,
Santipur Municipality.

FO
for 22.10.06
8/11/06

**SUDA**

রাজ্য নগর উন্নয়ন সংস্থা
STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ
"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নং SUDA-67/2006/ 1105

তারিখ 19.10.06

From: Director, SUDA

To: The Manager,
State Bank of India
Saltlake,
Kolkata

Sub: Request for stop payment of Bank Draft Nos. 319903 dt. 14.9.06 for Rs. 3,37,000/-,
320085 dt. 21.9.06 for Rs. 19,440/- and 319854 dt. 13.9.06 for Rs. 1,31,112/- respectively

Sir,

This is to inform you that three a/c payee Bank Drafts as mentioned in the subject were prepared by your Bank on our advice in favour of Chairman, Santipur Municipality on SBI, Santipur Branch debiting our a/c No. 01000050203.

The said Bank Drafts were handed over to the authorized representative of the Santipur Municipality on 17.10.06

Now, the Chairman, Santipur Municipality has reported vide their Memo No. 2937/4/24 dt. 18.10.06 and No. 2949/1/24 dt. 19.10.06 that the said Bank Drafts have been lost.

I would therefore, request you for 'stop payment' of the said Bank Drafts.

Thanking you,



Yours faithfully,

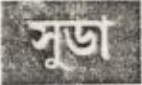
Director, SUDA

Encl: copy of FIR

Copy forwarded for information & necessary action to:

- i) The Manager of SBI, Santipur Branch, Santipur.
- ii) The Chairman, Santipur Municipality

Director, SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ

"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নং SUDA-67/2006/ 1247

তারিখ 15.11.2006

From :- Director, SUDA

To :- The Manager,
State Bank of India
Salt Lake City, Kolkata-91.

Sub : Preparation of Account Payee Demand Draft
Current Account No. 010000 50203

Community based Primary Health Care Services

You are requested to kindly arrange for preparation of the following Demand Drafts as per details given below, debiting the amount from this office Current Account No. 01000050203, lying with your branch in respect of Community based Primary Health Care Services.

Sl. No	Name of Payee	Amount Rs.	SBI Branch & Code No.
1.	Chairman, Nabadwip Municipality	306000.00	Nabadwip - 2090
2.	Chairman, Dhulian Municipality	258000.00	Dhulian - 6932
Total :		564000.00	
(Rupees Five lakh sixty-four thousand only)			

(Debasis Mitra)
Joint Secretary
M.A.Department, GOWB

(C.Sircar)
Director
SUDA

দূরভাষ : ৩৫৮ ৬৪০৩/৬৪২১/৫৭৬৭, ফ্যাক্স : ৩৫৮ ৫৮০০

Tel : 358 6403/6421/5767, Fax : 358 5800, E.Mail : dirsuda@cal 3.vsnl.net.in

To
The Director,
SUDA
Kolkata.



Immediate
FO
14/11/06

278-043 (STD : 03472)

भारतीय स्टेट ब्यांक (0590)

৭৮, নেতাজী সুভাষ রোড,

শান্তিপুর, নদীয়া (পঃ বঃ) পিন-৭৪১৪০৪

भारतीय स्टेट बैंक

STATE BANK OF INDIA (0176)

78, Netaji Subhas Road,

Santipur, Nadia, (W.B.) Pin—741404

Br./Gen./Zost: Act/01

Date 25.10.06..

Dear Sir,

Noting of stop payment
of Drafts

Ref:- SUDA-67/2006/105

Dt. 19-10-06

In connection with the copy of your letter, under reference, addressed to the Branch manager, Salt Lake Branch, we have to request you to give us the full details of the drafts mentioning also the prefix numbers to enable us to perform the "stop payment" exercise at our end.

yours faithfully,

Br. Manager.

- copy forwarded for necessary action to
- i) The Branch Manager, SBI, Salt Lake Branch.
 - ii) The Chairman, Santipur Municipality.

Branch Manager

(03472) STD : 03472

ভাৰতীয় ষ্টেট ব্যাংক (০১৭০)

১৮, নেতাজী সুভাষ রোড,

কলিকতা - ৭০০ ০৯১

স্টেট ব্যাংক অফ ইন্ডিয়া

STATE BANK OF INDIA (0170)

18, Netaji Subhas Road,

Kolkata, India (W.B.) Pin-700091



To
The Director
S. D. A.
Kolkata

Br. Gen. Post Off.

Date 25.10.02

To
State Urban Development Agency

ILGUS BHAVAN
H-C Block, Sector-III
Bridham Nagar
Kolkata - 700,091

Ref:- SDA-2/000/102
Dt. 19-10-02

In connection with the copy of your letter, under reference
attached to the Branch Manager, SDA, Netaji Subhas Road, we have
to request you to give us the full details of the draft
mentioned above the figure numbers to enable us to perform
the "stop payment exercise" at our end.
Yours faithfully,

Br. Manager

- i) The Branch Manager, SDA, Netaji Subhas Road.
- ii) The Chairman, Southern Municipalities

Branch Manager

সূডা

SUDA

রাজ্য নগর উন্নয়ন সংস্থা
STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ
"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নং SUDA-67/2006/1105

তারিখ 19.10.06

From: Director, SUDA

To: The Manager,
State Bank of India
Saltlake,
Kolkata

Sub: Request for stop payment of Bank Draft Nos. 319903 dt. 14.9.06 for Rs. 3,37,000/-,
320085 dt. 21.9.06 for Rs. 19,440/- and 319854 dt. 13.9.06 for Rs. 1,31,112/- respectively

Sir,

This is to inform you that three a/c payee Bank Drafts as mentioned in the subject were prepared by your Bank on our advice in favour of Chairman, Santipur Municipality on SBI, Santipur Branch debiting our a/c No. 01000050203.

The said Bank Drafts were handed over to the authorized representative of the Santipur Municipality on 17.10.06

Now, the Chairman, Santipur Municipality has reported vide their Memo No. 2937/4/24 dt. 18.10.06 and No. 2949/1/24 dt. 19.10.06 that the said Bank Drafts have been lost.

I would therefore, request you for 'stop payment' of the said Bank Drafts.

Thanking you,

Encl: copy of FIR

Yours faithfully,

Director, SUDA

Copy forwarded for information & necessary action to:

- i) The Manager of SBI, Santipur Branch, Santipur.
- ii) The Chairman, Santipur Municipality

Director, SUDA

দুরভাষ : ৩৫৮ ৬৪০৩/৬৪২১/৫৭৬৭, ফ্যাক্স : ৩৫৮ ৫৮০০

Tel : 358 6403/6421/5767, Fax : 358 5800, E.Mail : dirsuda@cal 3.vsnl.net.in

Ajoy De

Member, W. B. Legislative Assembly
Chairman, Santipur Municipality



CODE - 953472

Phone : Office - 78029

Fax : 77170

Resi { 78003

{ 78262

Chamber - 78111

Ref. No. ...2937/4/24.....

Date ...18.10.2006.....

To
The Director,
State Urban Development Agency,
(SUDA) Govt. of West Bengal,
ILGUS BHAVAN, H.C. Block, Sector-III,
Bidhannagar, Kolkata - 700 091.

S i r,

In regret I like to inform you that the following Demand Drafts received from your office by our man named Sri Tapas Dhani on 17.10.06 have been snatched by some one from Sri Dhani on the way coming from your office to Santipur. Necessary F.L.R. has been lodged by Sri Dhani on 18.10.06 at Ashurst Street Police Station, Kolkata and its G.D.F.No. is 1885 dated 18.10.06.

- 1) D.D.No.319903 dt. 14.9.06 Rs. 3,37,000/-
- 2) D.D.No.320085 dt. 21.9.06 Rs. 19,440/-
- 3) D.D.No.319854 dt. 13.9.06 Rs. 1,31,112/-

Under the circumstances stated above you are cordially requested please look into the matter and arrange for issuing fresh D.D. in favour of this Municipality as early as possible. The inconvenience caused for it may kindly be ignored considering the affairs.

With thanks,

Yours faithfully,

Chairman,
Santipur Municipality.

Ajoy De

Member, W. B. Legislative Assembly
Chairman, Santipur Municipality



CCDE. 963472
Phone: Office 78029
Fax: 77170
Resi { 78003
 78282
Chamber - 78111

Ref. No. 2949/1/24

Date 19/10/2006

To
The Director,
State Urban Development Agency (SUDA),
Govt. of W. Bengal,
ILCUS BHABAN,
H.C. Block, Sector-III,
Bidhannagar,
Kolkata - 700105.

Sub : Missing of three A/C Payee Demand Drafts, bearing Nos.
1) D.D.No. 319903 dt. 14.9.06, amounting to Rs. 3,37,000/-
2) D.D.No. 320085 dt. 21.9.06, amounting to Rs. 19,440/- &
3) D.D.No. 319854 dt. 13.9.06 amounting to Rs. 1,31,112/-
issued by the Director, SUDA in favour of the Chairman,
Santipur Municipality.

Madam,

In continuation of this office Memo.No. 2937/4/24,
dt. 18.10.2006, on the subject cited above, I am sending
herewith a copy of G.D.No. 1885, dt. 18.10.2006, Amberst
Street Police Station, Kolkata, for your perusal and necessary
action in the matter at an early date.

Yours faithfully,

Encl : As stated

Ajoy De
19.10.06
Chairman,
Santipur Municipality.

FC
for immediate
in: a. p.
19/10/06

To
The Officer-in-charge,
Amba Street Police Station,
Kolkata.
P.D. Entry No

dt. = 18-10-2006.

1885 dt. 18/10/2006

বিষয় :- মাননীয় চেয়ারম্যানের হস্তাক্ষরিত
স্বাক্ষরিত A/c payee cheque - স্বাক্ষরিত
সংক্রান্ত স্বাক্ষরিত G.D.E.



কিঃ বিঃ মাননীয় চেয়ারম্যানের হস্তাক্ষরিত
স্বাক্ষরিত A/c payee cheque - স্বাক্ষরিত
সংক্রান্ত স্বাক্ষরিত G.D.E.
স্বাক্ষরিত ১৮/১০/০৬

স্বাক্ষরিত মাননীয় চেয়ারম্যানের হস্তাক্ষরিত
স্বাক্ষরিত A/c payee cheque - স্বাক্ষরিত
সংক্রান্ত স্বাক্ষরিত G.D.E.
স্বাক্ষরিত ১৮/১০/০৬

স্বাক্ষরিত মাননীয় চেয়ারম্যানের হস্তাক্ষরিত
স্বাক্ষরিত A/c payee Bank Draft - স্বাক্ষরিত
সংক্রান্ত স্বাক্ষরিত G.D.E.
স্বাক্ষরিত ১৮/১০/০৬

- ①. D. D. No. - 319903, dt. 14-09-2006, Amount - B. 337,000/-
 - ②. D. D. No. - 320085, dt. 21-09-2006, Amount - B. 19,440/-
 - ③. D. D. No. - 219854, dt. 13-09-2006, Amount - B. 31,100/-
- All the demand drafts, issued by the director, SUDA
Govt. of W.B, in favour of The Chairman, Santipur Municipality

স্বাক্ষরিত
চেয়ারম্যান
সন্তাপুর পৌরসভা

Ajoy De

Member, W. B. Legislative Assembly
Chairman, Santipur Municipality



CODE - 953472

Phone: Office - 78029

Fax: 77170

Res: 78003

Res: 79282

Chamber - 79111

Ref. No. 2937/6/24.....

Date 19.10.2006.....

To
The Director,
State Urban Development Agency,
(SUDA) Govt. of West Bengal,
ILGUS BHAVAN, H.C. Block, Sector-III,
Bidhannagar, Kolkata - 700 091.

S I R.

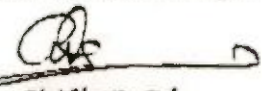
In regret I like to inform you that the following Demand Drafts received from your office by our man named Sri Tapas Dhani on 17.10.06 have been snatched by some one from Sri Dhani on the way coming from your office to Santipur. Necessary F.I.R. has been lodged by Sri Dhani on 18.10.06 at Amburst Street Police Station, Kolkata and its G.D.No. As 1885 dated 18.10.06.

- 1) D.D.No. 319903 dt. 14.9.06 Rs. 3,37,000/-
- 2) D.D.No. 320095 dt. 21.9.06 Rs. 19,440/-
- 3) D.D.No. 319854 dt. 13.9.06 Rs. 1,31,112/-

Under the circumstances stated above you are cordially requested please look into the matter and arrange for issuing fresh D.D. in favour of this Municipality as early as possible. The inconvenience caused for it may kindly be ignored considering the affairs.

With thanks,

Yours faithfully,


Chairman,
Santipur Municipality.

রাজ্য নগর উন্নয়ন সংস্থা
STATE URBAN DEVELOPMENT AGENCY

"ইলগাস ভবন", এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ০৯১, পশ্চিমবঙ্গ

"ILGUS BHAVAN", H-C Block, Sector-III, Bidhannagar, Kolkata 700 091, West Bengal

ক্রমিক নং SUDA-67/2006/ 942

তারিখ 19.09.2006

MEMORANDUM

Community based Primary Health Care Services in 63 Non-KMA ULBs –
Release of 1st installment of fund

Fund is hereby released in favour of ULBs as per details shown below for Community based Primary Health Care Services in 63 Non-KMA ULBs – Release of 1st installment of fund.

Sl. No.	Name of the payee	Draft No.	Draft Date	Amount (Rs.)
1.	Chairman, Dalkhola Municipality	319897	14.09.2006	219000.00
2.	Chairman, Kaliagunj Municipality	319898	14.09.2006	230000.00
3.	Chairman, Gangarampur Municipality	319899	14.09.2006	233000.00
4.	Chairman, Old Malda Municipality	319900	14.09.2006	247000.00
5.	Chairman, Rampurhat Municipality	319901	14.09.2006	230000.00
6.	Chairman, Dubrajpur Municipality	319902	14.09.2006	228000.00
7.	Chairman, Santipur Municipality	319903	14.09.2006	337000.00
8.	Chairman, Birnagar Municipality	319904	14.09.2006	219000.00
9.	Chairman, Taherpur NAA	319905	14.09.2006	216000.00
10.	Chairman, Ranaghat Municipality	319906	14.09.2006	194000.00
11.	Chairman, Basirhat Municipality	319907	14.09.2006	306000.00
12.	Chairman, Ashokenagar-Kalyangarh Municipality	319908	14.09.2006	303000.00
13.	Chairman, Baduria Municipality	319909	14.09.2006	230000.00
14.	Chairman, Taki Municipality	319910	14.09.2006	227000.00
15.	Chairman, Jaynagar-Mazilpur Municipality	319911	14.09.2006	219000.00
16.	Chairman, Panskura Municipality	319912	14.09.2006	230000.00
17.	Chairman, Haldia Municipality	319913	14.09.2006	286000.00
18.	Chairman, Ghatal Municipality	319914	14.09.2006	230000.00

Sl. No.	Name of the payee	Draft No.	Draft Date	Amount (Rs.)
19.	Chairman, Chandrakona Municipality	319915	14.09.2006	213000.00
20.	Chairman, Ramjibanpore Municipality	319916	14.09.2006	211000.00
21.	Chairman, Khirpai Municipality	319917	14.09.2006	205000.00
22.	Chairman, Kharar Municipality	319918	14.09.2006	205000.00
23.	Chairman, Sonamukhi Municipality	319919	14.09.2006	222000.00
24.	Chairman, Katwa Municipality	319920	14.09.2006	256000.00
25.	Chairman, Gushkara Municipality	319921	14.09.2006	227000.00
26.	Chairman, Dainhat Municipality	319922	14.09.2006	219000.00
27.	Chairman, Kandi Municipality	319923	14.09.2006	230000.00
28.	Chairman, Memari Municipality	319924	14.09.2006	227000.00

Utilisation certificate may please be sent immediately after the cumulative funds on this component released in your favour is utilised.

The Integrated Progress Report (MIS) may also kindly be sent regularly (quarterly) as requested earlier. In case, the Municipality qualifies for further funds, an updated MIS report may also be sent.

The Money receipt in Form 42 may kindly be sent immediately after receiving the draft.

Enclo: As stated above


Director, SUDA

SUDA-67/2006/ 942 /) (45)

19.09.2006

Copy for information to :-

1. The Chairman, Dalkhola/ Kaliagunj/ Gangarampur/ Old Malda/ Rampurhat/ Dubrajpur/ Santipur/ Birnagar/ Ranaghat/ Basirhat/ Ashokenagar-Kalyangarh/ Baduria/ Taki/ Jaynagar-Mazilpur/ Panskura/ Haldia/ Ghatal/ Chandrakona/ Ramjibanpore/ Khirpai/ Kharar/ Sonamukhi/ Katwa/ Gushkara/ Dainhat/ Kandi/ Memari Municipality and Taherpur NAA. He is requested to arrange collection of the demand fraft from this office. It may kindly be ensured that all money receipts against previous releases by SUDA have been submitted. For compelling circumstances, we may not be able to hand over the draft, if any Money Receipt is wanting. MIS as on 30.06.2006 is also required.
2. Shri Sajal Bhowmick, Joint Secretary, MA Deptt.
3. The Chief Engineer, M.E. Directorate.
4. The Director of Local Bodies.
5. P.S. to MIC, M.A. Department.
6. The District Magistrate, Uttar Dinajpur/ Dakshin Dinajpur/ Malda/ Birbhum/ Nadia/ North 24 Parganas/ Purba Medinipur/ Paschim Medinipur/ Burdwan/ Murshidabad District
7. Finance Officer, SUDA.
8. Computer Section (Samir Sen)

Director, SUDA

Community Based Primary Health Care Services in 63 Non-KMA ULBs

Financial Guideline

1. A separate cash book is to be maintained. Head of A/Cs for each type of expenditure is to be recorded in the cash book quoting voucher no., narration of the expenditure, stating the party to whom paid and cheque no. etc.
2. Cash is to be signed by the person dealing with Cash Book and the Finance Officer as per the existing norms of the Municipality.
3. Bank Reconciliation Statement is to be prepared at the end of each month
4. Pay order for each type of expenditure is to be given either by the Chairperson or Vice-Chairperson of the Municipality concerned.
5. Revenue stamp for the payment exceeding Rs. 5,000/- (Rupees five thousand) only is to be affixed in the bill.
6. Statement of Expenditure (SOE.) is to be forwarded to this office in the Format given below by 10th of the following month :-

Sl. No.	Voucher No. & Date	Item of Expenditure	Nature of Expenditure	Amount (Rs.)
1.	Training	Cost of training material	.....
2.	Hiring Charge of venue	.....
3.	Cost of tiffin	.....
4.	Contingency	.....

- a) Xerox copies of bills and vouchers duly authenticated by either Chairperson or Vice-Chairperson of the Municipality.
- a) A certificate to the effect that "the amount has not been preferred earlier".
- b) Monthly Summary Sheet on Statement of Expenditure (Format enclosed).
7. Utilisation Certificate (UC) is to be forwarded at quarterly interval *and*
8. Advance payment should not be treated as expenditure. * Only after actual payment, the expenditure is to be included in the Statement of Expenditure and Utilisation Certificate.
9. 1st installment of fund will be released by SUDA covering elements of (a) procurement of furniture & equipment for training, (b) furniture for Management & Supervision Cell of the ULB, (c) training for HHWs, (d) sensitization of stakeholders at ULB level and (e) lump sum operating cost.
10. Subsequent installment of fund will be released on submission of U.C. / Statement of Expenditure to the extent of 70% of the fund released earlier along with item wise requisition by the ULB.
11. Fund allotment to other items will be followed in due course as and when required.

** In such cases, advances, final adjustment vouchers will be treated as expenditure.*

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H/C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091

West Bengal

Ref No SUDA-Health/63 ULBs/06/

Date 08.2006

From : Director, SUDA

To : The Chairman

..... Municipality

Sub. : Release of 1st installment of fund worth Rs. towards expenditure in connection with Community Based Primary Health Care Service in 63 Non-KMA ULBs.

Sir / Madam,

An A/C payee demand draft bearing no. dt. for an amount of Rs. (Rupees) only is released to meet up concomitant expenditure in connection with Community Based Primary Health Care service in 63 Non-KMA ULBs.

You are requested kindly to send your authorized representative along with money receipt to collect the said draft from the A/C section of SUDA

Financial guideline is enclosed herewith. You are also requested kindly to submit monthly Statement of Expenditure (SOE) and quarterly Utilisation Certificate (UC) as laid down in the said guideline.

Yours faithfully,

Director, SUDA

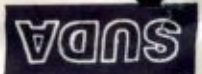
.08.2006

SUDA-Health/63 ULBs/06/

CC :

Finance Officer, SUDA

Director, SUDA



RAFT

9/0-2

Working Sheet for release of 1st installment of fund

District	Sl. No.	Name of ULBs	Proc. of Furn. & Equip. for Trg. @ Rs. 50,000/-	Proc. of Furn. For M & S Cell for ULB @ Rs. 80,000/-	Training of HHWs						Training Sub-Total	Sensitization of stake holders @ Rs. 5,000/-	Operating Cost @ Rs. 5,000/-	Total
					Training Materials @ Rs. 300/-	Tiffin @ Rs. 30/-	Mobility @ Rs. 20/-	Trainers fee @ Rs. 150/-	Contingency @ Rs. 10% of total					
Bankura	1	Sonamukhi	50000.00	80000.00	7800.00	35100.00	18000.00	13500.00	7440.00	81840.00	5000.00	221840.00		
	2	Dubrajpur	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
	3	Nalhati	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
Birbhum	4	Rampurhat	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90285.00	5000.00	230285.00		
	5	Sainthia	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
	6	Dainhat	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	219035.00		
Burdwan	7	Gushkara	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
	8	Jamuria	50000.00	80000.00	18600.00	83700.00	50400.00	13500.00	16620.00	182820.00	5000.00	322820.00		
	9	Katwa	50000.00	80000.00	11400.00	51300.00	28800.00	13500.00	10500.00	115500.00	5000.00	255500.00		
Cooch Behar	10	Kulti	50000.00	80000.00	24000.00	108000.00	66600.00	13500.00	21210.00	233310.00	5000.00	373310.00		
	11	Memari	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
	12	Raniganj	50000.00	80000.00	18000.00	81000.00	48600.00	13500.00	16110.00	172100.00	5000.00	317210.00		
Dakshin Dinajpur	13	Dinhata	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	219035.00		
	14	Haldibari	50000.00	80000.00	6600.00	29700.00	14400.00	13500.00	6420.00	70620.00	5000.00	210620.00		
	15	Mathabhanga	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	213425.00		
Darjeeling	16	Mekhliganj	50000.00	80000.00	5700.00	25650.00	11700.00	13500.00	5655.00	62205.00	5000.00	202205.00		
	17	Tufanganj	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	213425.00		
	18	Gangarampur	50000.00	80000.00	9000.00	40500.00	21600.00	13500.00	8460.00	93060.00	5000.00	233060.00		
Hooghly	19	Kalimpong	50000.00	80000.00	11100.00	49950.00	27900.00	13500.00	10245.00	112695.00	5000.00	252695.00		
	20	Kurseong	50000.00	80000.00	9600.00	43200.00	23400.00	13500.00	8970.00	98670.00	5000.00	238670.00		
	21	Mirik	50000.00	80000.00	5700.00	25650.00	11700.00	13500.00	5655.00	62205.00	5000.00	202205.00		
Jalpaiguri	22	Arambag	50000.00	80000.00	9300.00	41850.00	22500.00	13500.00	8715.00	95865.00	5000.00	235865.00		
	23	Tarakeshwar	50000.00	80000.00	7800.00	35100.00	18000.00	13500.00	7440.00	81840.00	5000.00	221840.00		
	24	Dhupguri	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
Malda	25	Mal	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	227450.00		
	26	Old Malda	50000.00	80000.00	10500.00	47250.00	26100.00	13500.00	9735.00	107085.00	5000.00	247085.00		
	27	Contai	50000.00	80000.00	12300.00	56350.00	31500.00	13500.00	11265.00	123915.00	5000.00	263915.00		
Medinipur (East)	28	Egra	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	219035.00		
	29	Haldia	50000.00	80000.00	14700.00	66150.00	38700.00	13500.00	13305.00	146355.00	5000.00	286355.00		
	30	Panskura	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90350.00	5000.00	230250.00		
Medinipur (West)	31	Tamluk	50000.00	80000.00	10800.00	48600.00	27000.00	13500.00	9990.00	108890.00	5000.00	248890.00		
	32	Chandrakona	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	213425.00		
	33	Ghatal	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	230255.00		
Medinipur (West)	34	Jhargram	50000.00	80000.00	9000.00	40500.00	21600.00	13500.00	8460.00	93060.00	5000.00	233060.00		
	35	Kharar	50000.00	80000.00	6000.00	27000.00	12600.00	13500.00	5910.00	65010.00	5000.00	205010.00		
	36	Khirpai	50000.00	80000.00	6000.00	27000.00	12600.00	13500.00	5910.00	65010.00	5000.00	205010.00		
	37	Ramjibanpur	50000.00	80000.00	6600.00	29700.00	14400.00	13500.00	6420.00	70620.00	5000.00	210620.00		

Contd.

CP-10.

District	Sl. No.	Name of ULBs	Proc. of Furn. & Equip. for Trg. @ Rs. 50,000/-	Proc. of Furn. For M & S Cell for ULB @ Rs. 80,000/-	Training of HHWs					Training Sub-Total	Sensitization of stake holders @ Rs. 5,000/-	Operating Cost @ Rs. 5,000/-	Total
					Training Materials @ Rs. 300/-	Tiffin @ Rs. 30/-	Mobility @ Rs. 20/-	Trainers fee @ Rs. 150/-	Contingency @ Rs. 10% of total				
Murshidabad	38	Beldanga	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	5000.00	213425.00
	39	Dhulian	50000.00	80000.00	11700.00	52650.00	29700.00	13500.00	10755.00	118305.00	5000.00	5000.00	258305.00
	40	Jingani Azingani	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	5000.00	230255.00
	41	Kandi	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	5000.00	230255.00
	42	Murshidabad	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	5000.00	227450.00
	43	Birnagar	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	5000.00	219035.00
	44	Chakdah	50000.00	80000.00	9600.00	43200.00	23400.00	13500.00	8970.00	96670.00	5000.00	5000.00	236670.00
	45	Coopers Camp	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	5000.00	213425.00
	46	Nabadwip	50000.00	80000.00	16800.00	75600.00	45000.00	13500.00	15090.00	165990.00	5000.00	5000.00	305990.00
	47	Ranaghat	50000.00	80000.00	9300.00	4050.00	22500.00	13500.00	4935.00	54285.00	5000.00	5000.00	194285.00
	48	Santipur	50000.00	80000.00	20100.00	90450.00	54900.00	13500.00	17895.00	196845.00	5000.00	5000.00	368845.00
49	Talherpur	50000.00	80000.00	7200.00	32400.00	16200.00	13500.00	6930.00	76230.00	5000.00	5000.00	216230.00	
50	Ashokenagar Kalyangarh	50000.00	80000.00	16500.00	74250.00	44100.00	13500.00	14835.00	163185.00	5000.00	5000.00	303185.00	
51	Baduria	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	5000.00	230255.00	
52	Bangaon	50000.00	80000.00	15300.00	68850.00	40500.00	13500.00	13815.00	151965.00	5000.00	5000.00	291965.00	
53	Basrihat	50000.00	80000.00	16800.00	75600.00	45000.00	13500.00	15090.00	165990.00	5000.00	5000.00	305990.00	
54	Gobardanga	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	5000.00	230255.00	
55	Habra	50000.00	80000.00	17400.00	78300.00	46800.00	13500.00	15600.00	171600.00	5000.00	5000.00	311600.00	
56	Taki	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	5000.00	227450.00	
57	Jhalda	50000.00	80000.00	6900.00	31050.00	15300.00	13500.00	6675.00	73425.00	5000.00	5000.00	213425.00	
58	Raghunathpur	50000.00	80000.00	7200.00	32400.00	16200.00	13500.00	6930.00	76230.00	5000.00	5000.00	216230.00	
59	Diamondharbour	50000.00	80000.00	8400.00	37800.00	19800.00	13500.00	7950.00	87450.00	5000.00	5000.00	227450.00	
60	Jaynagar Mazilpur	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	5000.00	219035.00	
61	Dalkhola	50000.00	80000.00	7500.00	33750.00	17100.00	13500.00	7185.00	79035.00	5000.00	5000.00	219035.00	
62	Islampur	50000.00	80000.00	9000.00	40500.00	21600.00	13500.00	8460.00	93060.00	5000.00	5000.00	233060.00	
63	Kaliaganj	50000.00	80000.00	8700.00	39150.00	20700.00	13500.00	8205.00	90255.00	5000.00	5000.00	230255.00	
Total			3150000.00	5040000.00	617400.00	2740800.00	1512000.00	850500.00	572040.00	6292440.00	315000.00	315000.00	15112440.00

OFFICE OF THE MUNICIPAL COUNCILLORS OF RAMJIBONPORE

P.O.—RAMJIBONPORE :: DIST.—PASCHIM MEDINIPUR

No. 181 R/M



From,

The Chairman / Vice-Chairman, Ramjibonpore Municipality.

To

The Director, SUDA,

(Health wing) ILGUS Haban, Salt Lake City,

Kolkata.

Dated. Ramjibonpore, the 17. 5. 2007

Sir,

I beg to state that the community based pry. Health care services have been running. Training of H.M.W. will be completed on 21.05.07 upto 30.4.07 Rs. 2,09,034/- have been expended out of Rs. 2,11,000/- for the above programme. Statement of Expenditure from Nov'06 to April'07 and Utilisation certificate are submitted to the Director, SUDA, Vide Memo No. 131 R/M dated- 2.5.07.

Statement of Expenditure, U.C. etc. are enclosed herewith for your favour of your kind perusal and taking necessary action.

Further I beg to state that necessary fund will be require for the above programme. I therefore requested you sanctioned necessary fund on the following head.

(1) For Training	-	Rs. 50,000/-
(2) " Equipments	-	Rs. 1,20,000/-
(3) " Operating cost	-	Rs. 30,000/-
(4) " H.M.W. (Honararium)-		
11x100x6	-	Rs. 66,000/-
(5) " Contingency	-	Rs. 26,600/-

Total : Rs. 2,92,600/-

26,600/-

2,66,000/-

Yours faithfully,



Chairman,
Ramjibonpur Municipality
Ramjibonpur Municipality

Rs. 2.66 lakhs
may be released.
thru. DD.

22.5.07