

MAULANA AZAD NA HUNAL UKDU UNIYEKSH Y (Salary and personal claims Section-F&A) RETURN MEMOS FOR MEDICAL BILLS

| Name: | | | | | | | | |
|--|--|-----|-------|------|-------|-------|-----|-----|
| Design | ation: | | | | | | | |
| Departi | ment: | | | | | | | |
| Bill No | 's | | | | | | | |
| Bill An | nount Rs. | | | | | | | |
| | Observations by Finance and Accounts | | | | | | | |
| 9. 10 111 122 133 144, 155, 166, 177, 188, 199, 221, 222, 232, 244, 255, 266, 277, 288, 299, 301, 322, 333, 344, 355, 366, 377, 388, 399, 400, 400, 400, 400, 400, 400, 400, 4 | Time bar bills/alteration at pharmacy bill date/amount Prescription is not enclosed/Original receipts / bill are not enclosed. Proforma is not signed by Employee/Certificate 'A' is not signed by Medical Officer with registration number and stamp. Cash bills/Receipts are not countersigned by doctor Certificate 'A' is not correctly/completely filled, specially point-f | |) | | | |) | |
| 42. 43. | Valid prescription not attached and Proper Pharmacy/ Diagnostic / physiotherapy/surgical bill not enclosed | (|) | | | | (|) |
| 45. | Consultation date/pharmacy bill dated are after Medical Cell Inward date Consultation date mentioned not matching with prescription attached and pharmacy/diagnostic bills not attached | y b | ills/ | pres | cript | ion w | ise | () |
| | Purchased equipment | | | | | (| () | |
| 48. | Inpatient bill Calculation/Totaling errors | | | | (| (|) | |
| 49. | | | | | 1 | / | | |