

T. R. FORM NO.46

[See sub-rule (2) of T. R. 6.39]

**CERTIFICATE OF GENERAL PROVIDENT FUND DEDUCTIONS
IN RESPECT OF GROUP 'D' EMPLOYEES**

NAME OF THE OFFICE : _____		
DDO Code: _____	Bill No.: _____	Date: ___/___/___
Token No.: _____	Date: ___/___/___	T.V. No.: _____
Date: ___/___/___		
Pay Bill for the Month of _____, 20__		

Certified that an amount of Rs. _____ (Rupees _____ only) as per following break-up have been deducted as General Provident Fund Deductions in respect of Group 'D' employees claimed in this bill payable on 1st of _____ under the head of account _____ (Salary Head of Account).

Receipt Head of Account						
Name of the Employee	Employee ID No.	GPF A/C No.	Amount of monthly subscription (Rs.)	Amount of refund of withdrawals (Rs.)	Total Amount (Rs.)	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Total Rs.						

Bill Clerk Accountant

Signature of D.D.O _____

Date _____

Designation _____