

AUDIT COMPLETION CERTIFICATE

This is certify that M/s. ___NALINI & MURALI ASSOCIATES_____ (Firm Name), Chartered Accountants , ___HYDERABAD. _____ (Address) , has conducted Audit for the Financial year 2015-16 On _____ (Date of Audit) of RMSA Scheme School/Girls Hostel/District office.

Date :
office

Name of the School/Girls Hostel/District

Place :

Authorized Signatory

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RASHTRIYA MADHYAMIK SHIKSHA ABHIYAN
RECEIPTS & PAYMENTS FOR THE FINANCIAL YEAR 2015-16

	NAME OF DISTRICT :	
	NAME OF SCHOOL :	
	Name of the Bank :	
	U-DISE CODE :	
	Account No :	
	RECEIPTS	Amount in Rs
1	Opening Balance	
	(i) Cash in Hand	
	(ii) Cash at Bank	
2	School Grant from state	
3	Interest from Bank	
4	Advance Received	
5	Other Grant	
6	Misc Income	
(A)	TOTAL RECEIPTS	
	PAYMENTS	
	Recurring Cost	
1	Teachers salary	
2	Minor repair	
3	Staff Salaries	
4	Office contingencies	
5	Electricity Charges	
6	Water charges	
7	Internet Charges	
8	Conveyance	
9	In-service teacher training	
10	Induction teacher training	
11	Repair and maintenance	
12	Excursion/study tour for teachers	
13	Training of community members	
14	Guidance and counselling cell	
15	Equity related activities	
16	Excursion trip for students	
17	Misc payments	
18	Advances given	
19	Bank charges	
20	Other charges	
(B)	Total Recurring Expenses	
	Non-Recurring Expenses	
1	Civil works	
2	Class rooms/Additional Classrooms	
3	Science Laboratory	
4	Lab Equipments	
5	Head Master/Principal room	
6	Office room	
7	Girl's activity room	
8	computer room/Laboratory	
9	Art/Craft/Culture room	
11	Library	
12	Toilets block	

13	Separate Girls Toilets	
14	Drinking water facility	
15	Furniture and Fixtures	
16	Residential Teacher quarter	
17	Major repairing and renovations	
18	Any other Activity	
©	Total Non-recurring expenses	
(D)	Total Expenses [(B)+ (C)]	
(E)	<u>CLOSING BALANCES [(A) - (D)]</u>	
	Cash-in-Hand	
	Cash at Bank	

(Signature of the Auditor)

(Signature of Head Master)

Observations (to be filled by Auditor) :

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RMSA SCHOOLS CONSOLIDATION FORMAT

NAME OF DISTRICT

	S.No	1
	NAME OF SCHOOL	
	Name of the Bank	
	Account No.	
	RECEIPTS	Amount in Rs
1	<u>Opening Balance</u>	
	(i) Cash in Hand	
	(ii) Cash at Bank	
2	School Grant from state	
3	Interest from Bank	
4	Advance Received	
5	Other Grant	
6	Misc Income	
(A)	TOTAL RECEIPTS	-
	PAYMENTS	
	Recurring Cost	
1	Teachers salary	
2	Minor repair	
3	Staff Salaries	
4	Office contingencies	
5	Electricity Charges	
6	Water charges	
7	Internet Charges	
8	Conveyance	
9	In-service teacher training	
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15	Equity related activities	

16	Excursion trip for students	
17	Misc payments	
18	Advances given	
19	Bank charges	
20	Other charges	
(B)	Total Recurring Expenses	-
	Non-Recurring Expenses	
1	Civil works	
2	Class rooms/Additional Classrooms	
3	Science Laboratory	
4	Lab Equipments	
5	Head Master/Principal room	
6	Office room	
7	Girl's activity room	
8	computer room/Laboratory	
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12	Toilets block	
13	Separate Girls Toilets	
14	Drinking water facility	
15	Furniture and Fixtures	
16	Residential Teacher quarter	
17	Major repairing and renovations	
18	Any other Activity	
©	Total Non-recurring expenses	-
(D)	Total Expenses [(B)+ (C)]	-
(E)	<u>CLOSING BALANCES [(A) - (D)]</u>	-
	Cash-in-Hand	

	Cash at Bank	
(F)	Grand Total [(D) + (E)]	-
(G)	<u>Controls Totals (A-F)</u> <u>(difference should be "0"</u> <u>Zero)</u>	-

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