

**FORM T. R. - 42**  
**(See Rule 406)**

<b>Head of Account</b>	Bill No. : _____ Date : _____
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Received the sum of Rs. \_\_\_\_\_/- (Rupees \_\_\_\_\_ only) being the amount payable under the **"DEPOSIT LINKED INSURANCE SCHEME"** sanctioned by the \_\_\_\_\_ vide his order No. \_\_\_\_\_ dated \_\_\_\_\_ (copy/copies enclosed) in respect of Shri/Smt./Kum. \_\_\_\_\_.

<b>Grant for the Year</b> _____	<b>Rs.</b>
<b>Expenditure upto this Bill</b>	<b>Rs.</b>
<b>Balance</b>	<b>Rs.</b>

**Signature of Drawing & Disbursing Officer**

**Countersigned for Rs.** \_\_\_\_\_

**FOR USE IN PRE-CHECK UNIT**

Pay Rs.

Examined

Accountant

Accounts Officer.

**FOR USE IN ZONAL ACCOUNTS OFFICE**

Admitted Rs. \_\_\_\_\_

Objected Rs. \_\_\_\_\_

Reasons for objection :

Auditor

Superintendent

Gazetted Officer.