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MISSION DIRECTOR NATIONAL RURAL HEALTH MISSION, J&K.



Jammu Office: Regional Institute of Health & Family Welfare, Nagrota, Jammu.  
Telefax: 0191-2674114; 2674244; email: mdrhmk@gmail.com

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Telefax: 0194-2430359, 0194-2431167; email: dnokashmir@gmail.com

The Assistant Director,  
Rehbar-E- Sehat (RIS),  
Jammu.

No: SHS/J&K/NRHM/21103-108

Dated: 11/3/2013

Sub: Release of GIA on account of one day orientation of ANMs in HIMS/MCTS under NRHM under Mission Flexipool during year 2012-13.

Sir,

In reference to the subject cited above, permission is hereby accorded to organize one day orientation of ANMs working in Urban Health Centres/ Urban Health Posts of Jammu Division in HIMS/MCTS for 5 groups under Mission Flexipool.

As such, you are authorized to incur expenditure up to **Rs.279750.00 (Rupees Two Lac Seventy Nine Thousand Seven Hundred Fifty only)** to organize one day orientation of ANMs working in Urban Health Centres/ Urban Health Posts of Jammu Division in HIMS/MCTS for 5 groups out of unspent balance available with you under the head trainings.

**The Grant-in-Aid is subject to the following conditions:**

1. That the above authorization is exclusively meant for one day orientation of ANMs working in Urban Health Centres/ Urban Health Posts of Jammu Division in HIMS/MCTS for 5 groups under Mission Flexipool during the year 2012-13.
2. That the funds sanctioned are utilized strictly as per the guidelines issued by the MOH&FW, GOI and after observing all codal formalities required under rules.
3. That the proper record of Cash Book, Ledger, Assets and other relevant record are to be maintained for check of any visiting team Central/State Govt. team.
4. That the monthly statement of expenditure and Utilisation Certificate is sent to the State Health Society regularly.
5. That the account of the grantee shall be open to the inspection by the sanctioning authority and Audit both by the Comptroller and Auditor General of India under the provision of CAG (DPC) Act 1971 and internal Audit by Principal Accounts Office of the Ministry of Health &
6. Family Welfare, Government of India, whenever the society is called upon to do so.

Yours Sincerely,

*[Signature]*  
Mission Director,  
NRHM, J&K

Copy to the:-

1. Joint Director, (P&S) NRHM, J&K for information.
2. FA/CAO, NRHM, J&K.
3. Divisional Nodal Officer, NRHM, J&K, Jammu Division for information.
4. Programme Manager, Maternal Health, NRHM, J&K, for information.
- ✓ 5. Programme Manager, Child Health, NRHM, J&K, for information.