

FORM NO. GFR-3 (REVISED)
CLASSIFICATION AND ACCOUNTING PROFORMA

(To be attached with each bill preferred at the Pre-Audit counter of the A.G. Office Quetta)

Account to be charged to:-

Federal	Provincial	District	Tehsil
Govt.	Govt.	Govt.	Govt.

(Please tick the relevant box)

Space for Token/T.V.No.
 (For use in A.G./Treasury Office)

Department: _____

DDO Code: _____

Demand No. _____

Nature of Claim

Contingency	Salary	TA/TTA	GPF	Medical	
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Current Expenditure

(Met from Revenue / Met from Capital)

Development Expenditure

(Met from Revenue / Met from Capital)

Head of Account

Major function code					
Minor Function code					
Detailed Function Code					

Payments

Detailed Object

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Deductions

Detailed Object *Amount*

Gross Claim Rs. _____

Net Claim Rs. _____

Total Deduction Rs. _____

(Appropriation)

Budget Allocation

Additional Allocation

Withdrawals

Total

Total Expenditure

Balance

Signature

Drawing & disbursing Officer (DDO)
 (Please affix Official Rubber Stamp)

Dated: _____

Accepted by Branch Office
 (A.G. Office)

Cheque Number

Amount Rs.

Date:

Voucher:

Bundle Number

NOTE: The Proforma is to be filled with utmost care as it is not only required for control of expenditure but also for accounting
 * Please quote authority