



### SUMMARY SHEET

Criteria 6	QIM	6.3.1	2017-18 To 2021-22
Title		Faculty Empowerment Strategies	

#### **6.3.1: The institution has effective welfare measures and Performance Appraisal System for teaching and non-teaching staff**

The following measures are taken to ensure the welfare of both teaching and non-teaching staff:

- Provident fund for eligible teaching and non-teaching staff
- Faculties are deputed for higher studies with pay
- Financial assistance by sanctioning interest-free loans against salary
- Accidental group insurance
- Advanced salary
- Different types of leaves (Maternity leave, Special casual leave, Duty leave, Marriage leave, Medical leave, Casual leave, Compensatory off)
- Free Medical facility
- Staff quarters at minimal charges
- Uniform allowances for supporting staff
- Staff cubicles
- Free show card for Biometric

[Click here](#) for Institute HR policy

[Click here](#) Compiled data on EPF &Advanced salaries of Teaching staff

[Click here](#) Compiled data on EPF &Advanced salary of non-Teaching staff

[Click here](#) for Different types of leaves availed data

**Academic Year**  
**2021-2022**



COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With  
EMPLOYEES' PROVIDENT FUND ORGANISATION)

TRRN 312211003687

Establishment Code & Name PUKOL1919023000 INDIRA INSTITUTE OF PHARMACY SADAVALI

Dues for the wage month of October 2021

Address : AT POST SADAVALI DEVRUKH , TAL SANGAMESHWAR DIST RATNAGIRI, RATNAGIRI, MAHARASHTRA

Total Subscribers :

EPF 23 2,62,022  
EPS 23 2,62,022  
EDLI 23 2,62,022

Total Wages :

2,62,022

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	1,310	0	0	0	1,310
2	Employer's Share Of	9,613	0	21,832	1,310	0	32,755
3	Employee's Share Of	31,445	0	0	0	0	31,445
Grand Total : Sixty-Five Thousand Five Hundred Ten Rupees Only							65,510

(This is a system generated challan on 11-NOV-2021 15:37, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY / ABRY.

	PMRPY	ABRY
A) A/C no 1 (Employer share) ( Rs.) -	0	0
B) A/C no 10 (Pension fund) ( Rs.) -	0	0
C) A/C no 1 (Employee share) ( Rs.) -	0	0
D) Total (A + B + C) ( Rs.) -	0	0
E) Total remittance by Employer ( Rs.) -	65,510	
F) Total amount of uploaded ECR (D + E) (	65,510	





INR

<b>Reference No.</b>	CKR9339800
<b>Debit Account Number</b>	00000035486190349
<b>Debit Branch</b>	DEVROKH, RATNAGIRI
<b>Remarks</b>	
<b>Transaction Date</b>	11-Nov-2021
<b>Amount</b>	INR 65,510.00
<b>Status</b>	Success
<b>Reason</b>	Processed



Health Insurance

# Star Health and Allied Insurance Company Limited

Accident Care (Group) Insurance

Unique Identification No: IRDAI/SH/ACC/11/1022011-5

Policy Schedule

<b>Policy No</b> : P/151129/02/2023/000099	<b>Previous Policy No</b> :
<b>Proposer's Code</b> : 29560059	<b>GSTIN</b> : 27AAJCS4517L1ZY
<b>Proposer's Name</b> : M/S.INDIRA INSTITUTE OF PHARMA	<b>SAC CODE</b> : 997133/Accident and Health Insurance Services
<b>Address</b> : DEVRUKH SADAVALI RATNAGIRI Sadavali,Ratnagiri,Maharashtra-415804	<b>Issuing Office Code</b> : 151129 <b>Issue Office Name</b> : Branch Office - Ratnagiri <b>Address</b> : 2nd floor,210, Arihant Space Center, Near Lotlikar Hospital, Marutimandir, Ratnagiri - 415612. <b>Phone No</b> : 02352-227234/02352-227235. <b>E-mail Id</b> : ratnagiri.bo@starhealth.in
<b>Phone No</b> : -/9482073920/ <b>E-mail Id</b> : <b>Proposer GSTIN</b> : -	<b>Place of Supply</b> : -
<b>Date of Inception of first policy</b> : 09-JUN-2022	<b>Fulfiller Code</b> : SH47414
<b>Renewal Year</b> : NEW	<b>Intermediary Code</b> : <b>BA0000379928</b>
<b>Receipt No</b> : 1479000874	<b>Name</b> : <b>Mrs.SAWANT</b> <b>SHRADDHA KISHOR</b>
<b>Receipt Date</b> : 09/06/2022	<b>Phone</b> : <b>8805337109/8805337109</b>
<b>Premium</b> : Rs. 6,251/- <b>CGST @9%</b> : 563/- <b>SGST / UGST @9%</b> : 563/- <b>Stamp Duty</b> : Rs.10/- <b>Total Premium</b> : Rs.7,377/-	<b>E-mail Id</b> : <b>shraddhaswant15047@gmail.com</b>
<b>Total Premium in words</b> : Total Premium In Words : As Agreed	
<b>Period Of Insurance</b> : From 00:00 Hrs On 09/06/2022 To Midnight Of :08/06/2023	

### Risk Coverage Details

<b>No. of Persons Covered</b>	47
<b>Total Sum Insured</b>	Rs. 9400000
<b>Total Sum Insured (in words)</b>	Indian Rupees Ninety-Four Lakhs Only

### Optional Benefit

<b>Medical Expenses Extension</b>	No
<b>Hospital Cash</b>	No
<b>Home Convalescence</b>	No

### Sector Classification :

Rural	
-------	--

Office of the Principal  
Indira Institute of Pharmacy, Sadavali.

Entered by : SH33619

Inward No - 390

Approved by : SH33619

Place : PUNE

Date : 25/06/2022

For and on behalf of  
Star Health and Allied Insurance Company Ltd.

Date : 11/06/2022

Signature

IRDAI Regn. No 129

Corporate Identity Number U66010TN2005PLC056649

Email ID : info@starhealth.in

All the amounts mentioned in this policy are in Indian rupees



Authorised Signatory

Please see overleaf



# Star Health and Allied Insurance Company Limited

Branch Office - Ratnagiri 2nd floor, 210, Arihant Space Center, Near Lotlikar Hospital, Marutimandir, Ratnagiri - 415612, PUNE.

## Collection Receipt

Customer Code : CB0000117911

Received from : M/S.INDIRA INSTITUTE OF PHARMA

Customer Address : DEVRUKH

SADAVALI

RATNAGIRI

Collection No : 11-01/1479000874

Collection Date : 09/06/2022

Office Code : 151129 - Branch Office - Ratnagiri

Supplier GSTIN : 27AAJCS4517L1ZY

Place of Supply : -

State Code

Customer GSTIN : -

Amount Collected : Rs. 7376/-

Amount in words : Indian Rupees Seven Thousand Three Hundred Seventy-Six Only

Towards the Following : PREMIUM RECEIPT RENEWAL POLICY

S. No.	Proposal Ref. No	Fulfiller Code	Intermediary Code	Amount Collected	Mode of Pay	Bank Name	CHQ/CC/DD No	CHQ/DD/BC Dt
1		SH47414	BA0000379928	7376	BC	Bank of India (BOI)	22159819008	08/06/2022

Note : Receipt Subject to realization of Cheque / DD

This is only an evidence of receipt of money by the company

Risk will commence once the proposal is examined and accepted

For Star Health and Allied Insurance Co. Ltd



IRDA Regn. No 129

Corporate Identity Number L66010TN2005PLC056649

Email id : info@starhealth.in



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY**  
 At & Po. Sadavali (Devrukh), Tal. Sangameshwar, Dist. Ratnagiri

**DEBIT VOUCHER**

Vr. No. :

Date : 05/05/2022

c. of Gratuity payable

To, Dr. B. C. Hataparkhi

Being	Rs.	Ps.
4th Installment of gratuity	100,000/-	
In words Rs. <u>One lakh only</u>	<b>TOTAL</b>	100,000/-

~~SANCTIONED FOR PAYMENT~~

CH. / D. D. No. 156196

Dated: 05/05/2022

STAMP

Prepared By

Accountant

Approved By

Receiver's Signature

बँक ऑफ इंडिया जमा / भुगतान पर्ची

शाखा : Devy.

दिनांक : 06 05 2022

एसबी/सीए/ओडी/सीसी/आरडी/टीएल/डीएल खाता सं./क्रेडिट कार्ड नं.  
144016310000260

नाम Dr. B. C. Hataparkhi.

टेलि. नं. : \_\_\_\_\_

रुपये : रु. 100,000/- पैसे \_\_\_\_\_

राशि अक्षरों में One lakh only

चेक नं./दिनांक/बैंक एवं ग्राहक का नाम	रु.	पैसे
BoI, Devy	100000/-	
Ch No. 156196		
कुल	100000/-	

अधिकारी / कैशियर/सिवाँ



जमा / भुगतान पर्ची

शाखा : Deu

दिनांक : 18 08 2021

एसबी/सीए/ओडी/सीसी/आरडी/टीएल/डीएल खाता सं./क्रेडिट कार्ड नं.

144010510004369

नाम E Y Jadhav

टेलि. नं. :

रुपये : रु. 10,000/- पैसे

राशि अक्षरों में Ten thousand only

चेक नं./दिनांक/बैंक एवं शाखाएं का नाम	रु.	पैसे
<u>BoI, Deu</u>	<u>10,000/-</u>	
<u>12/19/21</u>		
कुल	<u>10,000/-</u>	

अधिकारी / कैशियर/सिविआं



बैंक  
50,0  
विव



सौ. ईश्वर्या वैभव जाधव.  
लिपिक  
इंदिरा इन्स्टिट्यूट ऑफ फार्मसी  
साडवली  
दि. १७/०६/२०२१

प्रति,  
प्राचार्य  
इंदिरा इन्स्टिट्यूट ऑफ फार्मसी साडवली

विषय: अग्रीम रक्कम (अॅडवॉन्स) मिळण्याबाबत. . .  
अर्जदार: सौ. ईश्वर्या वैभव जाधव.

महोदय,  
मी सौ. ईश्वर्या वैभव जाधव, इंदिरा इन्स्टिट्यूट ऑफ फार्मसी साडवली मध्ये लिपिक या पदावर काम करत आहे. माझ्या नॅणंदेचा लग्नसोहळा दि. २२/०६/२०२१ रोजी असल्यामुळे, सदर खर्चासाठी मला रु. १०,०००/- एवढ्या रक्कमेची आवश्यकता आहे. सदर रक्कम माझ्या पगारातून दर महा ५०००/- एवढी कट करून घ्यावी.

तरी कृपया मला अग्रीम रक्कम (अॅडवॉन्स) मिळावा या साठी मी तुमच्याकडे अर्ज करीत आहे.

कळावे,

आपली विश्वासू

*S. Jadhav*

(सौ. ईश्वर्या वै. जाधव)

Forwarded to Hon. Chairman, P.S.P.S. Ambaw for consideration  
and necessary action.

*17/06*

*Ch NO 121971*

*18/06/2021*

दि. ०७/०३/२०२२

प्रती,  
 प्राचार्य,  
 इंदिरा इंस्टिट्यूट ऑफ फार्मसी,  
 साडवली (देवरुख).

विषय - अग्रिम रक्कम (अॅडवॉन्स) मिळण्याबाबत.....

अर्जदार : स्वप्निल पद्माकर बने

महोदय,

उपरोक्त विषयास अनुसरून मी आपल्या संस्थेत २००८ साला पासून इलेक्ट्रिशियन या पदावर कार्यरत असून मला माझ्या वैयक्तिक कामासाठी २०,०००/- रकमेची आवश्यकता आहे, तरी माझ्या पगारातून दर महा २०००/- रु. एवढी रक्कम कट करून घ्यावी.

तरी कृपया मला अॅडवॉन्स मिळावा ही नम्र विनंती.

कळावे,

Ch No 1546 63  
 08/03/2022

आपला विश्वासू

*(Signature)*

(स्वप्निल पद्माकर बने)

*(Signature)*  
 07/03/2022

Forwarded to the management  
 for the approval.

*(Signature)*  
 दि. ०७/०३/२०२२



12-05-2021	843619270	5376169	JCS No.5376169Bt.14000		84,454.00	1,78,602.38CR
12-05-2021	843619641		Commission charges	118.00		1,78,484.38CR
12-05-2021	843688338	5376599	JCS No.5376599Bt.14000		42,098.00	2,20,582.38CR
12-05-2021	843688680		Commission charges	118.00		2,20,464.38CR
13-05-2021	849371678	1133119726	BUPI/1133119726B2/13-05-2		20,224.00	2,40,688.38CR
14-05-2021	B142561		BAHATE SHRADDDHA LAXMAN	33,817.00		2,06,871.38CR
14-05-2021	B142585		SWAPNIL P BANE	20,000.00		1,86,871.38CR
14-05-2021	855994455	8130058536	IMPS/113408819402/SPICE M		1.00	1,86,872.38CR
14-05-2021	856020035	9511689684	IMPS/113409009528/PRATAP		5,000.00	1,91,872.38CR
14-05-2021	856020235	9511689684	IMPS/113409009585/PRATAP		5,000.00	1,96,872.38CR
14-05-2021	856020456	9511689684	IMPS/113409009672/PRATAP		3,210.00	2,00,082.38CR
14-05-2021	856143326	NEFTInward	NEFT-MANASI UDAY JAMENIS		65,310.00	2,65,392.38CR
15-05-2021	B186832		BY CASH-1402-LANJA		25,000.00	2,90,392.38CR
15-05-2021	863348257	1135851109	BUPI/113585110928/15-05-2		5,000.00	2,95,392.38CR
15-05-2021	863352535	1135534605	BUPI/113553460573/15-05-2		5,000.00	3,00,392.38CR
15-05-2021	863358263	1135065468	BUPI/113506546837/15-05-2		5,310.00	3,05,702.38CR
17-05-2021	879127143	1137616759	BUPI/113761675957/17-05-2		5,000.00	3,10,702.38CR
17-05-2021	879143331	1137896349	BUPI/113789634922/17-05-2		5,000.00	3,15,702.38CR
18-05-2021	B1324870		SELF	5,000.00		3,10,702.38CR
18-05-2021	B1372488		BY CASH-1440-DEORUKH		68,856.00	3,79,558.38CR
18-05-2021	890502165	1138165203	BUPI/113816520324/18-05-2		10,000.00	3,89,558.38CR
19-05-2021	B1312629		BY CASH-1440-DEORUKH		25,000.00	4,14,558.38CR
19-05-2021	B1325548		PRINCIPAL, INDIRA INSTITUT	2,00,000.00		2,14,558.38CR
19-05-2021	895236032	1139524555	BUPI/113952455569/19-05-2		9,000.00	2,23,558.38CR
19-05-2021	895245963	1139789516	BUPI/113978951646/19-05-2		6,000.00	2,29,558.38CR
19-05-2021	895823747	NEFTInward	NEFT-SWAMI SWAROOPANAND S		55,000.00	2,84,558.38CR
19-05-2021	898609011	1139420474	BUPI/113942047418/19-05-2		20,000.00	3,04,558.38CR
20-05-2021	84796640		Mr. PRABODHAN SHIKSHA	1,00,000.00		2,04,558.38CR
20-05-2021	84833836	9975433278	IMPS/114013494353/SRIPRAS		20,000.00	2,24,558.38CR
20-05-2021	88603533	1140741208	BUPI/114074120812/20-05-2		10,000.00	2,34,558.38CR
20-05-2021	88608632	1140790696	BUPI/114079069654/20-05-2		9,098.00	2,43,656.38CR
21-05-2021	B197069		BY CASH-1402-LANJA		23,038.00	2,66,694.38CR
24-05-2021	B1437352		BY CASH-1467-GANAPATIPOLE		50,000.00	3,16,694.38CR
24-05-2021	833180487	NEFTInward	NEFT-Mr. NIMESH GANGARAM	27,000.00		3,46,694.38CR
25-05-2021	841390738	NEFTOutwar	NEFT/ANKITA SANJAY MESTRY		3,19,694.38CR	3,19,689.06CR
28-05-2021	B1207321		Chrgs for NEFT Cust Pymnt	5.32		1,69,689.06CR
28-05-2021	862504034	NEFTInward	PRINCIPAL INDIRA INSTITUT	1,50,000.00		2,34,613.06CR
29-05-2021	869844529	NEFTInward	NEFT-GAJANAN VIHAYAK SANS	1,00,000.00		2,34,613.06CR
31-05-2021	B1107573		BY CASH-1467-GANAPATIPOLE		64,924.00	1,98,613.06CR
31-05-2021	B1398675		SELF	10,000.00		1,88,613.06CR
01-06-2021	B1209750		MAHARSHTRA STATE ELECTRICI	11,270.00		1,77,343.06CR
01-06-2021	894503936	1152265844	BUPI/115226584460/01-06-2		10,000.00	1,87,343.06CR
02-06-2021	88102929	NEFTInward	NEFT-ADLER MEDIEQUIP PRIV		84,343.00	2,71,686.06CR
09-06-2021	864414549	NEFTInward	NEFT-Mr. NARESH RAMCHANDR		34,924.00	3,06,610.06CR
10-06-2021	B1272072		SURAJ SUHAS JOYASHI		25,500.00	3,32,110.06CR
10-06-2021	B1274986		PRADHAN SHIKSHAN PRASAPAK	1,00,000.00		2,32,110.06CR
10-06-2021	B1276140		BY CASH-1440-DEORUKH		924.00	2,33,034.06CR
10-06-2021	B1277389		SELF	25,000.00		2,08,034.06CR
10-06-2021	873421035	NEFTOutwar	NEFT/YUCCA ENTERPRISES	2,498.00		2,05,536.06CR
10-06-2021	873421035		Chrgs for NEFT Cust Pymnt	2.36		2,05,533.70CR



**P. S. P. S's**  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Shekhar R. Kavale

Designation : Library clerk

Reason : personal work

No. of Days Required : 01 On / From 24/01/2022 To 24/01/2022

Alternative Arrangements made:

1) Mr. Jadhav y. m Sign. : [Signature] 25/01/2022

2) ..... Sign. : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)	<u>7 1/2</u>	<u>01</u>	<u>6 1/2</u>	<u>[Signature]</u>
				<u>[Signature]</u> <u>25/01/2022</u>

Address & Contact Nos. while on leave : ATP - KOSUMB, 9403959735

Thanking You

Your's faithfully

[Signature]

Date : 25/01/22

( Shekhar. R. Kavale )

May be granted Casual leave

[Signature]

Remarks : He / She has got 01 days of Casual Leave

Principal

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 25/01/22 for 01 days on / from 24/01/22 to 24/01/22 I have joined my duties today the 25/01/22

[Signature]

Principal  
Indira Institute of Pharmacy

Your's faithfully

[Signature]

( Shekhar. R. Kavale )

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty/leave\*\* giving the following particulars :

Name of the Applicant : M.S. Bhagyashree Padmaraj Dongare.

Designation : Lecturer.

Reason : M. Pharmacy Exam.

No. of Days Required : 01 On / From 27/10/2021 To .....

Alternative Arrangements made:

1) Ms. Shrutali S. Pilankar. Sign :

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>SCL 01</u>	<u>2 1/2</u>	<u>1</u>	<u>1 1/2</u>	

Address & Contact Nos. while on leave : 9404993129.

Thanking You

Date : 22/10/2021

May be granted .....

Remarks : He / She has got ..... days of ..... Leave

Your's faithfully

B. Dongare  
(M.S. Bhagyashree P. Dongare.)

Principal 22/10  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty/leave \*\* application dated 22/10/2021 for 01 days on / from 27/10/2021 to ..... I have joined my duties today the 28/10/2021

Your's faithfully

B. Dongare  
(M.S. Bhagyashree P. Dongare.)

Principal  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



Sahyadri Shikshan Sansthan

**GOVINDRAO NIKAM COLLEGE OF PHARMACY, SAWARDE**

**Tal: Chiplun, Dist. Ratnagiri Pin- 415606.**

(Approved By : All India Council for Technical Education – New Delhi, Govt. of Maharashtra & Mumbai University)

Telefax : 02355-264163, H.O. : 02355-264215/264315, e-mail: sssdgpharmacy@rediffmail.com

Date: 13/10/2021

## Online Second Sessional examination Time Table

**S. Y .M.Pharm (Sem III R-2019)**

**A.Y. 2021-22**

Sr No	Days & Dates	Time	Subject Code	Paper
1	27 /10/2021	11:30 am to 12:30 pm	MRM301T	Research Methodology & Biostatistics

Exam Incharge

Govindrao Nikam College of Pharmacy, Sawarde  
Tal. Chiplun, Dist. Ratnagiri 415606



Principal

Govindrao Nikam College of Pharmacy, Sawarde  
Tal. Chiplun, Dist. Ratnagiri, Pin - 415 606

Recd  
22/10

Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Janata Sahakari Bank Ltd Pune  
Loan Installment List SEPTEMBER 2021

Sr. No.	Name of Employee	A/c No.	Loan Amt	Installment
1	Mr. Yogesh Manohar Jadhav	1545/1629	500,000.00	9700.00
			Total	9700.00

Cheque No.	Date	Amount
131836	15/11/2021	9700.00



*Principal* 15/11  
Principal  
Indira Institute of Pharmacy,  
Sadavali (Devrukh)



**NAAC Accredited**  
PSPs IIP Sadavali  
Staff Quarter  
16.01.2023 18:55  
16.99227, 73.77775  
NH166, Ambaghat, Maharashtra 415801



05/06/2022

To

The principal.  
PSPS Indira Institute of pharmacy  
Sadavali

Sub - Requesting to provide staff quarters

Sir,

I have joined your college as Asst. professor in the month of June 2022 in Department of Pharmacognosy. I request you to provide me with staff quarters for accommodation purpose.

I will be thankful to you for this help and kindness.

Regards

Rohit Raj

Asst. professor

Dept. of pharmacognosy

Kumbhat  
05/06/22

Permitted to  
stay in staff quarters.

Kind attention to: Mr. A.M. Shinde  
To make the arrangement at nominal  
charges as per the policy.

**Tax Invoice**  
Original

(ORIGINAL FOR RECIPIENT)

<b>VINIT ENTERPRISES</b> C-20, Shankheshwar Heritage, Opp. Hotel Carnival, Maruti Mandir, RATNAGIRI. Pincode 415612 GSTIN/UIN: 27APWPP0353A1ZV State Name : Maharashtra, Code : 27 Contact : 9420047124/8805417771 E-Mail : vinitenterprises15@gmail.com	Invoice No.	Dated
	<b>VE/0234/2021-22</b>	<b>25-Jan-2022</b>
	Delivery Note	
	Supplier's Ref.	Other Reference(s)
Buyer <b>INDIRA INSTITUTE OF PHARMACY</b> SADVALI< DEORUKH TAL - Sangmeshwar Dist - Ratnagiri. Pin415804 Phone-02354-251499 email-info@iip.ind.in PAN/IT No : State Name : Maharashtra, Code : 27 Place of Supply : Maharashtra	Buyer's Order No.	Dated
	<b>HP/PO/206/2021-22</b>	<b>22-Jan-2022</b>
	Despatch Document No.	Delivery Note Date
	Despatched through <b>By Couriyer</b>	Destination

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	<b>ESSL X990+ID</b> SR.NO-BJ2C213960777	8471	<b>1 QTY</b>	12,350.00	QTY		<b>12,350.00</b>
2	<b>RFID CARD/ACCESS CARD/PROX CARD</b>	8301	<b>50 Nos</b>	50.00	Nos		<b>2,500.00</b>
							<b>14,850.00</b>
							<b>1,336.50</b>
							<b>1,336.50</b>
	<b>CGST</b>						
	<b>SGST</b>						
	<b>Total</b>						<b>₹ 17,523.00</b>

Goods Invoice No. - 35/2021/22  
 Date - 08-02-2022  
 Stores Incharge  
 IP Sadavali

Amount Chargeable (in words) **INR Seventeen Thousand Five Hundred Twenty Three Only** E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
8471	12,350.00	9%	1,111.50	9%	1,111.50	2,223.00
8301	2,500.00	9%	225.00	9%	225.00	450.00
<b>Total</b>	<b>14,850.00</b>		<b>1,336.50</b>		<b>1,336.50</b>	<b>2,673.00</b>

Tax Amount (in words) : **INR Two Thousand Six Hundred Seventy Three Only**

R. 20,19/1  
 ACTIONED FOR PAYMENT  
 C.H. / D. D. No. 154895  
 Dated: 08/04/2022

Company's PAN : APWPP0353A  
 Declaration  
 TERMS & CONDITIONS:- 1) Warranty as per Importer /Manufacturer /Agreed terms.No warranty on Physucally Damaged or burnt material. 2) Inte. shall be Charged at 0.01 % per day on delayed payment.3) Cheque Bounce Charges -750/-  
 Company's Bank Details  
 Bank Name : IDBI BANK  
 A/c No. : 0574102000001816  
 Branch & IFS Code: Shivaji Nagar, Ratnagiri Maharashtra & IBKL0000574  
 for VINIT ENTERPRISES

Customer's Seal and Signature  
 Authorised Signatory

SUBJECT TO RATNAGIRI JURISDICTION  
 This is a Computer Generated Invoice

Bill Received  
 10/02/2022



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir, medical leave.  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Ms. Shrutali S. Pilonkar

Designation : Lecturer

Reason : Medical emergency

No. of Days Required : 4 On / From 28/01/2022 To 01/01/2022

Alternative Arrangements made:

1) Ms. B.P. Dongare Sign: B. Dongare

2) Sign: \_\_\_\_\_

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>05 ml</u>	<u>15</u>	<u>05</u>	<u>10</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : 8624027852

Thanking You

Date : 01/02/2022

May be granted ml

Remarks : He / She has got 05 days of medical Leave

Your's faithfully

[Signature]  
( Ms. S. S. Pilonkar )

[Signature]  
Principal

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir, medical leave  
With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 01/02/2022 for 4 days  
on / from 28/01/2022 to 31/01/2022 I have joined my duties today the 01/02/2022

[Signature]  
Principal  
Indira Institute of Pharmacy

Your's faithfully

[Signature]  
( Ms. S. S. Pilonkar )

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

डॉ. सौ. गायत्री मयुरेश पाटील

(बी. ए. एम. एल.)  
मो. 7977770828



डॉ. श्री. मयुरेश मोरेश्वर पाटील

(बी. एच. एम. एल.)  
मो. 9405678878

**श्रीलक्ष्मी क्लिनिक**

दवाखान्याची वेळ :- स. ०९.०० ते दु. १२.०० वा. सायं. ०४.३० ते रात्री ०८.०० वा.

बुधवार बंद

R

31/01/2022

This is to certify that  
Mrs. Shrutali S. Pilankar 31428/f  
was suffering from cold, cough  
with gen. weakness treated  
as an OPD basis on 28/01/2022.  
Advice rest for 3-4 days.  
Now she is fit to join  
regular duty.

Dr. Gayatri Devi  
B.A.M.S.  
Regd. No. I-99682-A-1

**Tax Invoice**  
Original

(ORIGINAL FOR RECIPIENT)

<b>VINIT ENTERPRISES</b> C-20, Shankheshwar Heritage, Opp. Hotel Carnival, Maruti Mandir, RATNAGIRI. Pincode 415612 GSTIN/UIN: 27APWPP0353A1ZV State Name : Maharashtra, Code : 27 Contact : 9420047124/8805417771 E-Mail : vinitenterprises15@gmail.com	Invoice No.	Dated
	<b>VE/0234/2021-22</b>	<b>25-Jan-2022</b>
Buyer <b>INDIRA INSTITUTE OF PHARMACY</b> SADVALI< DEORUKH TAL - Sangmeshwar Dist - Ratnagiri. Pin415804 Phone-02354-251499 email-info@iip.ind.in PAN/IT No : State Name : Maharashtra, Code : 27 Place of Supply : Maharashtra	Delivery Note	
	Supplier's Ref.	Other Reference(s)
	Buyer's Order No.	Dated
	<b>HP/PO/206/2021-22</b>	<b>22-Jan-2022</b>
	Despatch Document No.	Delivery Note Date
	Despatched through	Destination
	<b>By Couriyer</b>	

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	<b>ESSL X990+ID</b> SR.NO-BJ2C213960777	8471	<b>1 QTY</b>	12,350.00	QTY		<b>12,350.00</b>
2	<b>RFID CARD/ACCESS CARD/PROX CARD</b>	8301	<b>50 Nos</b>	50.00	Nos		<b>2,500.00</b>
							14,850.00
							<b>CGST</b>
							<b>SGST</b>
							<b>1,336.50</b>
							<b>1,336.50</b>
<b>Total</b>							<b>₹ 17,523.00</b>

Goods Invoice No. - 35/2021-22  
 Date - 08-02-2022  
 Stores Incharge  
 IP Sadavali

Amount Chargeable (in words) E. & O.E

**INR Seventeen Thousand Five Hundred Twenty Three Only**

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
8471	12,350.00	9%	1,111.50	9%	1,111.50	2,223.00
8301	2,500.00	9%	225.00	9%	225.00	450.00
<b>Total</b>	<b>14,850.00</b>		<b>1,336.50</b>		<b>1,336.50</b>	<b>2,673.00</b>

Tax Amount (in words) : **INR Two Thousand Six Hundred Seventy Three Only**

R.20,19/1  
 ACTIONED FOR PAYMENT  
 C.H. / D. D. No. 154895

Company's PAN : **APWPP0353A**

Declaration  
**TERMS & CONDITIONS:-** 1) Warranty as per Importer /Manufacturer /Agreed terms.No warranty on Physucally Damaged or burnt material. 2) Inte. shall be Charged at 0.01 % per day on delayed payment.3) Cheque Bounce Charges -750/-

Company's Bank Details  
 Bank Name : **IDBI BANK**  
 A/c No. : **0574102000001816**  
 Branch & IFS Code : **Shivaji Nagar, Ratnagiri Maharashtra & IBKL0000574**

Customer's Seal and Signature for **VINIT ENTERPRISES**  
Authorized Signatory

SUBJECT TO RATNAGIRI JURISDICTION  
 This is a Computer Generated Invoice

Bill Received  
 10/02/2022



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY**

At & Po. Sadavali (Devrukh), Tal. Sangameshwar, Dist. Ratnagiri

**DEBIT VOUCHER**

Vr. No. :

Date : 07/04/2022

A/c. of Uniform

To, M. Vijaykumar

Being	Rs.	Ps.
stitching charges of class IV staff Uniform. (Bill No. 5400)	23,300/-	
<b>SANCTIONED FOR PAYMENT</b>		
Ch./D.D. No. 156171		
Dated: 07/04/2022		

In words Rs. Twenty three thousand three hundred only TOTAL

23,300/-

*[Signature]*

Prepared By

Accountant

Approved By

STAMP

Receiver's Signature



# VIJAY STITCHING, Devrukh

Tahasil Road, Shivaji Chowk, Devrukh. Mob.: 9421228783

No.: 5400

Name : आय. बाय. पी. साठवली

Date : शिवाई मुनिकॉम

Delivery Date : .....

**MONDAY CLOSE**

डिलेव्हरी वेळ : दररोज सायंकाळी ०६.०० वा. नंतर  
२ महिन्याच्या आत शिवलेले कपडे घेऊन जावेत.

Pant 43 x 350 = 15050	Advance : Nil
Shirt 33 x 250 = 8250	Balance Rs. : 23,300
Jodhapuri -	TIME DAILY 08.30 to 08.00
Safari -	
Salvar -	
Kurtha -	
<b>TOTAL Rs. 23300</b>	Prop. : M. Vijaykumar



*(Signature)*

Prepared by

Accountant

# M/S THE INTERIOR


H.No. 713/84, Ardhawada, Gaval, Mayem, Bicholim - Goa

Mob. No. 9921192729/9421156336

Email Address : [theinterior16@gmail.com](mailto:theinterior16@gmail.com)

GSTIN : 30ACJPH4672E2ZX

## TAX INVOICE

Bill to Buyer: <u>The principal</u> <u>Indira Institute of pharmacy</u> <u>Sadavali - Maharashtra</u>		Invoice No.	0060		
GSTIN:		Invoice Date	08/09/2022		
		Delivery Note			
		Supplier Ref.			
Sr. No.	Description	Qty/Mtr/Sq.Ft.	Rate	Per	Amount
1	Staff Room partition work including soft notice Board & writing board to partition specification : partition made by 2" x 2" sal wood inside partition structure, outside 8mm marin ply & finish with laminate for finishing & also use 8mm x 3mm teak wood border with painting	730 sq.ft	545/-	per sq.ft	3,97,305/-
		Total			Rs 397,305/-
		+ I.GSTIN(18%)			Rs 71,515/-
		GRAND TOTAL			Rs, 468,820/-
Tax Amount(In words) : <u>Four lakh seventy eight thousand eight-twenty only</u>					E. & O.E
Company Banks Details Bank Name : State Bank of India A/C No. : 31178291609 Branch Name : Bicholim-Goa IFSC Code : SBIN0000289					For The Interior OF THE INTERIOR  Authorised Signatory

Goods Inward No. - 61/2022-23  
Date - 13.09.22  
Stores Incharge  
MP Sadavali

less-TDS. 1.1. 4688/-



# M/S THE INTERIOR

H.No. 713/84, Ardhawada, Gaval, Mayem, Bicholim - Goa

Mob. No. 9921192729/9421156336

Email Address : theinterior16@gmail.com

GSTIN : 30ACJPH4672E2ZX

## TAX INVOICE

Bill to Buyer: <i>The principal Indira Institute of pharmacy Sadavali (Devrukh) Mah.</i>	Invoice No. <i>0061</i>
GSTIN:	Invoice Date <i>08/09/2022</i>
	Delivery Note
	Supplier Ref.

Sr. No.	Description	Qty/Mtr/Sq.Ft.	Rate	Per	Amount
<i>1)</i>	<i>0.8 mm laminate with (Texture)</i>	<i>03 NO</i>	<i>1500/-</i>	<i>per</i>	<i>4,500/-</i>
<i>2)</i>	<i>0.8 mm laminate (SF)</i>	<i>03 NO</i>	<i>1200/-</i>	<i>per</i>	<i>3600/-</i>
<i>3)</i>	<i>Adhesive (marin)</i>	<i>6 kg</i>	<i>310/-</i>	<i>per kg</i>	<i>1860/-</i>
<i>4)</i>	<i>Extra partition (incl. material &amp; laminate)</i>	<i>L/S</i>	<i>15000/-</i>	<i>-</i>	<i>15000/-</i>

Goods Inward No. - *G2/2022-23*  
 Date *13.09.22*  
 By *[Signature]*  
 Store Incharge  
 HP Sadavali

*office table*

*[Signature]*

Total	<i>₹ 24,960/-</i>
+ IGSTIN 18%	<i>₹ 4,493/-</i>
GRAND TOTAL	<i>₹ 29,453/-</i>

Tax Amount (In words) : *Twenty nine thousand four fifty three only*

E. & O.E

Company Banks Details  
 Bank Name : State Bank of India  
 A/C No. : 31178291609  
 Branch Name : Bicholim-Goa  
 IFSC Code : SBIN0000289

For The Interior  
  
  
 Authorised Signatory

*less TDS 1% → 295/-*

**Academic Year**  
**2020-2021**



**COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With  
EMPLOYEES' PROVIDENT FUND ORGANISATION)**

TRRN 3122011007873

Establishment Code & Name PUKOL1919023000 INDIRA INSTITUTE OF PHARMACY SADAVALI

Dues for the wage month of October 2020

Address : AT POST SADAVALI DEVRUKH , TAL SANGAMESHWAR DIST RATNAGIRI, RATNAGIRI, MAHARASHTRA

Total Subscribers :

EPF 25

2,78,367

EDLI 25

2,78,367

Total Wages :

2,78,367

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	1,392	0	0	0	1,392
2	Employer's Share Of	10,212	0	23,193	1,392	0	34,797
3	Employee's Share Of	33,405	0	0	0	0	33,405
<b>Grand Total : Sixty-Nine Thousand Five Hundred Ninety-Four Rupees Only</b>							<b>69,594</b>

(This is a system generated challan on 26-NOV-2020 16:30, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY / PMGKY.

	PMRPY	PMGKY
A) A/C no 1 (Employer share) ( Rs.) -	0	0
B) A/C no 10 (Pension fund) ( Rs.) -	0	0
C) A/C no 1 (Employee share) ( Rs.) -	0	0
D) Total (A + B + C) ( Rs.) -	0	0
E) Total remittance by Employer ( Rs.) -	69,594	
F) Total amount of uploaded ECR (D + E) (	69,594	





कर्मचारी भविष्य निधि संगठन  
Employees' Provident Fund Organization

भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६  
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

Generated On 05/12/2020 13:23:

**Payment Confirmation Receipt**

TRRN No :	3122011007873
Challan Status :	Payment Confirmed
Challan Generated On :	26-NOV-2020 16:30:00
Establishment ID :	PUKOL1919023000
Establishment Name :	INDIRA INSTITUTE OF PHARMACY SADAVALI
Challan Type :	Monthly Contribution Challan
Total Members :	26
Wage Month :	OCT-2020
Total Amount (Rs) :	69,594
Account-1 Amount (Rs) :	43,617
Account-2 Amount (Rs) :	1,392
Account-10 Amount (Rs) :	23,193
Account-21 Amount (Rs) :	1,392
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002261120587277
Payment Date :	26-NOV-2020
Payment Confirmation Date :	26-NOV-2020
Total PMRPY Benefit :	0



Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**


Ratnagiri District Co-op Bank Ltd  
Loan of Jijai Gramin Bigarsheti Sah. Patsanstha Marya, Devrukh  
Loan Installment List SEPTEMBER 2020

Sr. No.	Name of Employee	A/c No.	Loan Amt	Installment
1	Mr. Vaibhav Dilip Jadhav	1501008020136	50,000.00	1500.00
2	Mr. Vaibhav Dilip Jadhav	1501881100066	50,000.00	1164.00
3	Mr. Manohar Vasudev Khamkar	1501783100447	100,000.00	2200.00
			<b>Total</b>	<b>4864.00</b>

Cheque No.	Date	Amount
112913	22/10/2020	4864.00



22 OCT 2020

  
Principal 22/10  
Indira Institute of Pharmacy,  
Sadavali (Devrukh)

बैंक ऑफ इंडिया



जमा पावती

शाखा : केरल

दिनांक : 06 10 2020

एसबी/सीए/ओडी/आरडी/टीएल/डीएल/ खाते क्र./ क्रेडिट कार्ड नं.

144 01 01 10 00 16 77

नांव : श्रीमती मनोहर विद

संपर्क क्र. : रु. 25000/- पैसे

रुपये : रु. 25000/- पैसे

रु. अक्षरगत \* पंचमिस हजक सप्टेमा

धनादेश क्र./दिनांक/बैंक तथा शाखेचे नांव रु. पैसे

धनादेश क्र./दिनांक/बैंक तथा शाखेचे नांव	रु.	पैसे
Ch.No. 110995		
Date - 26.10.20		
Bank of India	25000/-	
Permit एरूण	25000/-	

अधिकारी / कॅशियर / एसडब्ल्यूडी

179

Mr.A.M.Shinde  
Storekeeper  
Indira Institute of Pharmacy  
Date-24/10/2020

To,  
The Principal  
Indira Institute of Pharmacy,  
Sadavali

Sub-Application for Salary Advance .....Reg.

Respected Sir,

Advertising to the subject cited above I undersigned Mr.A.M.Shinde working as storekeeper in your institute since last 12 years. Due to my some financial crises I want Rs.25,000 /-advances against my salary. Kindly deduct 5.000/- from my next five months salary to recovered the advance.

I hope you will consider request and grant me support on my need time

Thanking You.

Forwarded to Hon. Chairman, P.S.P., Mumbai  
for favourable consideration & necessary  
action

RE  
24/10/2020

Handwritten signature/initials

Yours truly,

Handwritten signature of Mr.A.M.Shinde

Mr.A.M.Shinde

CS NO 110995  
26/10/2020.



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Aditi P. Pawar

Designation : Lab- technician.

Reason : Personal

No. of Days Required : 1 On / From 13-3-2020 To -

Alternative Arrangements made:

1) Mrs. Durva's Panchal Sign : [Signature]

2) Sign : \_\_\_\_\_

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the HOD	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)	11	10	10	<u>[Signature]</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : 7709189453 (Sangmeshwar)

Thanking You

Date : 12-3-2020

May be granted CL

Remarks : He / She has got 1 days of CL Leave

Your's faithfully

A.P. Pawar

( Aditi P. Pawar )

Principal [Signature]

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 12-3-2020 for 1 days

on / from 13-3-2020 to - I have joined my duties today the 14-3-2020

Your's faithfully

A.P. Pawar

( Aditi P. Pawar )

Principal [Signature]  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)





**P. S. P. S's**  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mr. Prashil Narendra Charkari

Designation : Assistant Professor

Reason : Personal

No. of Days Required : 10 On / From 17/12/2020 To 26/12/2020  
after lunch

Alternative Arrangements made:

1) ..... Sign : .....

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the HOD	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)					
	<u>Marriage leave</u>	<u>10 days</u>			

Address & Contact Nos. while on leave : At post Khodashi 8446153147

Thanking You

Date : 16/12/2020

May be granted Marriage leave

Remarks : He / She has got 10 days of Marriage Leave

Your's faithfully  
Mr. P.N. Charkari

Principal  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 16/12/2020 for 10 days on / from 17/12/2020 to 26/12/2020 I have joined my duties today the 28/12/2020

Principal  
Indira Institute of Pharmacy

Your's faithfully  
Mr. P.N. Charkari

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

वक्रतुण्ड महाकाय  
सूर्यकोटि समप्रभः।



निर्विघ्नं कुरु मे देव  
सर्वकार्येषु सर्वदा॥

॥ श्री कुलदेवत प्रसन्न ॥  
॥ जय जय रघुवीर समर्थ ॥  
॥ श्री भक्तडीन प्रसन्न ॥

॥ श्री ॥  
॥ श्री गजानन प्रसन्न ॥  
॥ श्री महालक्ष्मी प्रसन्न ॥

॥ श्री विश्वकर्मा प्रसन्न ॥  
॥ श्री राम समर्थ ॥  
॥ श्री जुगाई प्रसन्न ॥

सप्रेम नमस्कार वि.वि.

आमचे येथे श्री सद्गुरुकृपेकरून कै.काशिनाथ गंगाराम चरकरी (गुरुजी) यांचा नातू

चि. प्रशिल

(श्री.व सो.दिपाली नरेंद्र चरकरी,  
मु.पो.खेडशी, ता.जि.रत्नागिरी यांचा सुपुत्र)



चि.सौ.कां.नेहा

(कै.विजय रामचंद्र बेनकर,  
मु.पो.लांजा यांची तृतीय कन्या)

ॐ यांचा शुभविवाह ॐ

मिती मार्गशीर्ष शु. ९ शके १९४२, बुधवार दि.२३ डिसेंबर २०२० रोजी दुपारी: १२ वा. ११ मि.

या शुभमुहूर्तावर करण्याचे योजिले आहे.कार्यसिध्दीस नेण्यास श्री समर्थ आहेत.  
कुलदेवतेची कृपाभिलाषा, अग्निहोमाची तेजस्विता, वेदमंत्रांची पवित्रता,  
सुमनांचा सुगंध व मंगलवाद्यांचे सुमंगल ध्वनी या सर्वांनी शोभित होणारा हा  
मंगल प्रसंग आपल्या उपस्थिती आणि आशिर्वादानेच परिपूर्ण होणार आहे.

तरी आपण या मंगलसमयी सहकुटुंब, सहपरिवार,  
उपस्थित राहून वधू-वरांस शुभाशिर्वाद देऊन सोहळ्याचा आनंद द्विगुणित करावा ही नम्र विनंती.

• आपले स्नेहांकीत •

श्री.नरेंद्र काशिनाथ चरकरी  
श्री.रविंद्र काशिनाथ चरकरी  
श्री.रविंद्र बाळकृष्ण पानवलकर



सौ.दिपाली नरेंद्र चरकरी  
सौ.रुपाली रविंद्र चरकरी  
सौ.रश्मी रविंद्र पानवलकर

श्रीमती ललिता काशिनाथ चरकरी

वरील विनंतीस मान देवून अगत्य येण्याची कृपा करावी.

समस्त चरकरी, पानवलकर, बेनकर, पोमेंडकर, आडमकर, कोळंबेकर, शिरवंडकर,  
शेमडकर, चांदेरकर, काताळकर, मसुरकर, सांदेकर आणि आप्तेष्ट परिवार.



निवास स्थान

श्री.नरेंद्र काशिनाथ चरकरी  
स.पो.खेडशी.

विवाह स्थळ

शिवपार्वती मंगल कार्यालय,  
लांजा हायवे जवळ,



11/12/2020

**P. S. P. S's**  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukhi).

Sir,

Medical Leave.

I am applying for Casual / Special Casual\* / Duty/leave\*\* giving the following particulars :

Name of the Applicant : Mrs. Durva S. Panchal

Designation : Lab. Technician

Reason : Medical

No. of Days Required : 05 On / From 16/12/2020 To 20/12/2020

Alternative Arrangements made:

- 1) Mrs. S.P. Mangale Sign : [Signature]
- 2) Sign : \_\_\_\_\_

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the HOD	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				<u>[Signature]</u>	
<u>ML-5 days</u>	<u>Medical Leave (40-5=35)</u>			<u>[Signature]</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : 9420883020

Thanking You

[Signature]

Your's faithfully

[Signature]

(Mrs. Durva S. Panchal)

Date :

May be granted medical leave

Remarks : He / She has got 5 days of medical Leave

[Signature]  
Principal 21/12  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
Medical leave  
With reference to my Casual / Special Casual\* / Duty/leave \*\* application dated 21/12/20 for 5 days on / from 16/12/20 to 20/12/20 I have joined my duties today the 21/12/20

Your's faithfully

[Signature]

(Mrs. Durva S. Panchal)

[Signature]  
Principal 21/12  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



# SMS Hospital

Healing • Humanity • Hospitality

Bhane (Khed) | Chiplun | Devrukh

20/12/2020

## Medical Certificate

This is to certify that Mrs. Durva S. Panchal  
27 yrs/F was under my treatment for acute  
dysmenorrhoea with menorrhagia since  
16/12/2020 to 20/12/2020 (i.e 5 days).

I had advise her complete rest in  
those 5 days.

Thank you

21/12

DR. PRAJAKTA SHINDE  
MBBS, DGO  
REG. NO:- 78535

DR. PRAJAKTA SHINDE  
MBBS, DGO  
REG. NO:- 78535

**Academic Year**  
**2019-2020**



**COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With  
EMPLOYEES' PROVIDENT FUND ORGANISATION**

TRRN 3121911003217

Establishment Code & Name PUKOL1919023000 INDIRA INSTITUTE OF PHARMACY SADAVALI

Dues for the wage month of October 2019

Address : AT POST SADAVALI DEVRUKH, TAL SANGAMESHWAR DIST RATNAGIRI, RATNAGIRI, RATNAGIRI, MAHARASHTRA

Total Subscribers : EPF 27 2,95,959 EPS 27 2,95,959 EDLI 27 2,95,959  
Total Wages : 2,95,959

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	1,480	0	0	0	1,480
2	Employer's Share Of	10,860	0	24,657	1,480	0	36,997
3	Employee's Share Of	35,517	0	0	0	0	35,517
Grand Total : Seventy-Three Thousand Nine Hundred Ninety-Four Rupees Only							73,994

**( Only for offline payment in case permitted by EPFO )**

**FOR BANKS USE ONLY**

Amount Received -----  
Date of presentation of -----  
Date of Realisation of -----  
SBI Branch Name -----  
SBI Branch Code -----

**FOR ESTABLISHMENT USE**  
(To be manually filled by  
Cheque/DD No. ----- Date: -----  
Cheque/DD drawn bank &  
Name of the Depositor-----  
Date of Deposit----- Mobile No. -----  
Signature of the -----

(This is a system generated challan on 09-NOV-2019 16:14, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY and PMPRPY-

- A) A/C no 1 (Employer share) ( Rs.) - 0  
B) A/C no 10 (Pension fund) ( Rs.) - 0  
C) Total (A + B) ( Rs.) - 0  
D) Total remittance by Employer ( Rs.) - 73,994  
E) Total amount of uploaded ECR (C + D) ( 73,994



INR

<b>Reference No.</b>	CKL2085932
<b>Debit Account Number</b>	00000035486190349
<b>Debit Branch</b>	DEVROKH, RATNAGIRI
<b>Remarks</b>	
<b>Transaction Date</b>	09-Nov-2019
<b>Amount</b>	INR 73,994.00
<b>Status</b>	Success
<b>Reason</b>	Processed

607

दि ०३/०३/२०१९

प्राचार्य,  
इंदिरा इंस्टीटयुट ऑफ फार्मसी,  
साडवली (देवरुख).

विषय - अग्रीम रक्कम (अॅडवॉन्स) मिळण्याबाबत.....

अर्जदार - मनोहर वासुदेव खामकर

महोदय,

उपरोक्त विषयास अनुसरुन मी आपल्या संस्थेत २०१० साला पासून शिपाई या पदावर कार्यरत असून मला माझ्या वैयक्तिक कामासाठी १०,०००/- रकमेची आवश्यकता आहे, तरी माझ्या पगारातून दर महा ५००/- रु. एवढी रक्कम कट करुन घ्यावी.

तरी कृपया मला अॅडवॉन्स मिळावा या साठी मी तुमच्याकडे विनंती अर्ज करीत आहे.

कळावे,

आपला विश्वासू  
M. Chaudhary  
(मनोहर वासुदेव खामकर)

Forwarded to Hon. Chairman, PPS for consideration

प्रति,  
मि. वासुदेव  
19/03/2019  
9/3/19

FUNCTIONED FOR PAYMENT

D.D. No. 076216

Dated: 14/03/2019



02-03-2019	BI670677	SELF	10,000.00			1,28,446.92CR
02-03-2019	BI672519	M S BHOPLKAR	2,801.00			1,25,645.92CR
02-03-2019	BI672519	NEFTInward				1,55,388.92CR
05-03-2019	BI719780	NEFT-ADLER MEDIEQUIP PRIV		29,743.00		1,69,494.92CR
06-03-2019	BI605962	BY CASH-1440-DEORUKH		14,106.00		1,76,484.92CR
06-03-2019	BI629931	BY CASH-1440-DEORUKH		6,990.00		2,26,484.92CR
06-03-2019	BI644770	PRINCIPAL INDIRA INSTITUTE		50,000.00		1,40,656.92CR
07-03-2019	BI588901	DD ON VARIOUS BRANCHES		30,039.00		1,70,695.92CR
07-03-2019	BI816356	BY CASH-1440-DEORUKH				1,63,695.92CR
11-03-2019	BI138346	DHANE FOOD PRODUCTS		285.00		1,63,980.92CR
11-03-2019	BI731810	BY CASH-1440-DEORUKH				1,14,480.92CR
11-03-2019	BI731810	JITENDRA S KADAM		285.00		1,14,765.92CR
11-03-2019	BI89873700	BUPI/906811302429/09-03-2				1,09,125.92CR
12-03-2019	BI896473	DAITRAY BHOSALE				1,07,878.92CR
12-03-2019	BI908916	ACCOUNT OFFICER BSNL				1,08,163.92CR
12-03-2019	S4769923	BUPI/907116177449/12-03-2		285.00		1,22,713.92CR
12-03-2019	S5493829	JCS No.5076598Br.14000		14,550.00		1,22,595.92CR
12-03-2019	S5494866	Commission charges				1,12,595.92CR
13-03-2019	BI444014	SELF		118.00		1,10,578.92CR
13-03-2019	BI539393	A M KANVAJE		10,000.00		1,10,578.92CR
13-03-2019	BI541761	MANDAR M PAVASKAR		2,017.00		1,09,262.92CR
13-03-2019	BI544666	AMOL B KHADE		1,316.00		1,04,262.92CR
13-03-2019	BI574711	BY SAYALI DILIP SAWANT		5,000.00		1,04,547.92CR
13-03-2019	BI688869	SHAIKENDRA KAMBLE		285.00		90,192.92CR
13-03-2019	BI0500975	RDC AC		14,355.00		66,037.92CR
14-03-2019	BI536867	BY CASH-1440-DEORUKH		24,155.00		67,662.92CR
14-03-2019	BI822254	QUALITY OFFICE EQUIPMENT		6,125.00		61,537.92CR
14-03-2019	BI823332	MANOHAR V KHANKAR		10,000.00		51,537.92CR
14-03-2019	BI628253	NEFTInward				1,11,537.92CR
18-03-2019	BI955413	BY CASH-1440-DEORUKH		60,000.00		1,22,157.92CR
19-03-2019	BI254118	rujuda enterprises		10,620.00		1,26,287.92CR
19-03-2019	BI430313	PRINCIPLE INDIRA INST OF		4,130.00		1,23,662.92CR
20-03-2019	BI210302	SUNIL B KARALE		2,625.00		5,76,337.08DR
20-03-2019	BI345324	PRINCIPLE INDIRA INST OF		7,00,000.00		5,77,232.08DR
20-03-2019	BI364796	PRINCIPLE INDIRA INST OF		895.00		9,22,767.92CR
20-03-2019	BI425775	MAITRI PETROL PUMP		15,00,000.00		9,10,767.92CR
20-03-2019	BI050319263	POSH ENTERPRISES		12,000.00		9,08,124.92CR
20-03-2019	BI050951722	NEFTOutwar		2,643.00		7,58,124.92CR
20-03-2019	BI207255	NEFT/PRINCIPLE INDIRA INS		1,50,000.00		7,38,107.22CR
22-03-2019	BI207255	Charges for NEFT Customer		17.70		6,58,107.22CR
22-03-2019	BI561872	PRINCIPLE INDIRA INST OF		1,00,000.00		6,48,107.22CR
22-03-2019	BI561872	SELF		10,000.00		6,46,371.22CR
22-03-2019	BI58524166	NEFT/ORCHID SCIENTIFIC &		1,736.00		6,46,371.22CR
22-03-2019	BI58524166	Charges for NEFT Customer		2.96		6,46,368.26CR
22-03-2019	BI58961490	NEFTInward				6,96,340.26CR
25-03-2019	BI71345856	NEFT-ADLER MEDIEQUIP PRIV		4,00,000.00		2,96,340.26CR
25-03-2019	BI71345856	NEFT/PRABODHAN SHIKSHAN P		29.50		2,96,310.76CR
26-03-2019	BI74459201	Charges for NEFT Customer				3,02,854.76CR
27-03-2019	BI186503	BUPI/908512963476/26-03-2		1,02,000.00		2,00,854.76CR
27-03-2019	BI186503	KAI SAU MEENATAI JR SA CC		16,000.00		1,84,854.76CR
27-03-2019	BI28480	S R MITKARI				2,00,854.76CR
27-03-2019	BI581637	BY CASH-1440-DEORUKH		5,000.00		1,95,854.76CR
27-03-2019	BI800450	ZORE SWATI BABAN		10,800.00		1,85,054.76CR
27-03-2019	BI803808	KHARAK MEDHA A				



Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Ratnagiri District Co-op Bank Ltd  
 Loan of Jijai Gramin Bigarsheti Sah. Patsanstha Marya, Devrukh  
 Loan Installment List SEPTEMBER 2019

Sr. No.	Name of Employee	A/c No.	Loan Amt	Installment
1	Mr. Vaibhav Dilip Jadhav	1501008020136	50,000.00	1500.00
2	Mr. Vaibhav Dilip Jadhav	1501881100066	50,000.00	1164.00
3	Mr. Manohar Vasudev Khamkar	1501783100447	100,000.00	2200.00
			<b>Total</b>	<b>4864.00</b>

Cheque No.	Date	Amount
	07/10/2019	4864.00



*[Signature]*  
 Principal  
 Indira Institute of Pharmacy,  
 Sadavali (Devrukh)



बँक ऑफ इंडिया



जमा पावती

शाखा : Devi

दिनांक : 09 03 2021

एसबी/सीए/ओडी/आरडी/टीएल/डीएल/ खाते क्र./ क्रेडिट कार्ड नं.

144016310000279

Mr. Prashant P More



संपर्क क्र.

रुपये :

₹. 138,313/- पैसे

One lakh thirty eight thousand three hundred thirteen only

घनादेश क्र./दिनांक/बँक तथा शाखेचे नांव रु. पैसे

BOT, Devi		138,313/-		
127628				
एकूण		138,313/-		

अधिकारी / कॅशियर / एसडब्ल्यूडी



P.S.P Sanstha's  
**Indra Institute  
of Pharmacy**

A/P. - Sadavali (Devrukh)  
Tal. Sangameshwar,  
Dist. Ratnagiri - 415 804  
(Maharashtra)  
Phone: 02354-261799  
Fax : 02354-261499  
Email : info@iip.ind.in  
URL : www.iip.ind.in  
**NAAC Accredited**

Ref No: IIP/ADMN/203/2020-21

Date: 25/02/2021.

To,  
Hon. Chairman  
Prabodhan Shikshan Prasarak Sanstha,  
Ambav, Devrukh.

Sub: Disbursement of gratuity amount in respect of **Mr. Prashant Premnath Mane.....reg.**

- Ref: 1) Mr. Prashant P. Mane letter dated 07/12/2019  
2) Mr. Prashant P. Mane letter dated 04/01/2020  
3) Mr. Prashant P. Mane letter dated 15/07/2020  
4) Institute letter No. IIP/Gen/10/2020-21, Dated: 22/07/2020  
5) Institute letter No. IIP/Gen/49/2020-21, Dated: 12/08/2020

Ry Sir,

Adverting to the subject & references cited above, I am here with requesting you to accord the permission for the disbursement of gratuity amount in respect of **Mr. Prashant Premnath Mane of Rs. 1,38,313.00 (Rupees One Lakh Thirty Eight Thousand Three Hundred Thirteen only)** as approved by the Sanstha office.

Kindly accept and sanction the same to enable me to settle the long-pending matter.

Thanking you,



Yours Sincerely,

*[Signature]*  
PRINCIPAL 25/02

*Permissi granted on 26/02/21*

*REC/ 25/02*



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Durva S. Panchal

Designation : Lab Technician

Reason : Personal

No. of Days Required : 1 On / From 2/12/19 To —

Alternative Arrangements made:

1) Aditi P Pawar Sign : A.P. Pawar

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)	<u>11 1/2</u>	<u>1</u>	<u>10 1/2</u>	<u>Srinidhi</u>

Address & Contact Nos. while on leave : 9420883020

Thanking You

Date : 3/12/19

May be granted CL

Remarks : He / She has got 1 days of CL Leave

Your's faithfully

(Mrs. D.S. Panchal)

Principal

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 3/12/19 for 1 days on / from 2/12/19 to — I have joined my duties today the 3/12/19

Principal

Principal  
Indira Institute of Pharmacy

Your's faithfully

(Mrs. D.S. Panchal)

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mr. Jadhav. Y. M.

Designation : Ass. Librarian

Reason : Election Duty - Z.P.

No. of Days Required : 01/12/2019, 08/12/2019, 11/12/2019, 12/12/2019, 13/12/2019  
On / From To

Alternative Arrangements made:

1) Mr. Kovale, S.R. Sign : [Signature]

2) Sign : \_\_\_\_\_

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>DL - 05 days → Election Training &amp; Duty</u>				<u>[Signature]</u>

Address & Contact Nos. while on leave : 9967882729

Thanking You

Date : 27/11/2019

May be granted duty leave

Remarks : He / She has got 5 days of duty Leave

Your's faithfully

[Signature]  
Jadhav. Y. M.

[Signature]

Principal  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
With reference to my Casual / Special Casual\* / Duty leave\*\* application dated \_\_\_\_\_ for \_\_\_\_\_ days on / from \_\_\_\_\_ to \_\_\_\_\_ I have joined my duties today the \_\_\_\_\_

[Signature]

Principal  
Indira Institute of Pharmacy

Your's faithfully

[Signature]  
Jadhav. Y. M.

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

## मतदानकेंद्राध्यक्ष आणि मतदान अधिकारी नेमणूक आदेश

## जिल्हापरिषद पोटनिवडणूक-२०११

## गट क्र.-३१-धामापूर तर्फे संगमेश्वर ता-संगमेश्वर, जि-रत्नागिरी.

महाराष्ट्र जिल्हा परिषद/पंचायत समिती निवडणूक नियम १९६२ अनुक्रमे नियम ८ व १० मधील तरतुदीनुसार मी, खालील तक्त्यातील रकाना क्रमांक २ व ३ मध्ये नमूद अधिका-यांची रकाना क्रमांक १ मध्ये दर्शविलेल्या मतदान केंद्रासाठी, मतदान केंद्राध्यक्ष आणि मतदान अधिकारी म्हणून नियुक्ती करित आहे. तसेच मी, नियम ८(३) मध्ये नमूद केलेप्रमाणे आजारपण वा अन्य अनिवार्य कारणामुळे मतदान केंद्राध्यक्षांच्या गैरहजेरीत, रकाना क्रमांक ४ मध्ये नमूद केलेल्या मतदान केंद्राध्यक्षांचे काम पाहण्यास प्राधिकृत करित आहे.

टिम क्रमांक	मतदान केंद्राध्यक्षांचे नांव	मतदान अधिका-यांची नावे	मतदान केंद्राध्यक्षांचे काम पाहण्यास प्राधिकृत मतदान अधिकारी यांचे नांव
१	२	३	४
	Shri.Kinjalkar Shashikant Ratnu 9860765165 (PRO) Bhaisha Ghosalkar Highschool Kadwai	1) Shri.SHANTARAM BABU BAVDHANE 9545875168 ASSISTANT TEACHER (PO-1) Z.P. Primary School Harpude No.2 2) Shri.Jadhav Yogesh Manohar 9967882729 Assistant Librarian (PO-2) Indira Institute Pharmacy College Sadavali 3) Smt.KASTURI KRISHNA MESTRI 9921056826 ASSITANT TEACHER (PO-3) Z.P.Primary School Pangari No.1 4) शिपाई कर्मचारी	Shri.SHANTARAM BABU BAVDHANE 9545875168 ASSISTANT TEACHER (PO-1) Z.P. Primary School Harpude No.2

मतदानाचा दिनांक १२/१२/२०११ वेळ सकाळी ७.३० वा ते सायंकाळी ५.३० वा पर्यंत

मतदान केंद्राध्यक्ष व सर्व मतदान अधिकारी हे पहिल्या व दुस-या प्रशिक्षणाकरिता - पंचायत समिती सभागृह संगमेश्वर(देवरुख) येथे होणा-या प्रशिक्षणास हजर रहावे.

प्रथम प्रशिक्षण : ०१/१२/२०११ रोजी सकाळी ९.०० वाजता.

द्वितीय प्रशिक्षण : ०८/१२/२०११ रोजी सकाळी ९.०० वाजता.

तसेच मतदान साहित्य ताब्यात घेणेकामी दिनांक ११/१२/२०११ रोजी सकाळी ७.३० वाजता तहसिल कार्यालय, संगमेश्वर(देवरुख) येथे तसेच दिनांक - १२/१२/२०११ रोजी मतदान प्रक्रिया पुर्ण झालेनंतर, मतदान यंत्र व इतर साहित्य तहसिल कार्यालय, संगमेश्वर(देवरुख) या ठिकाणी जमा करावे. तसेच या आदेशाच्या मागील बाजूस असलेल्या सुचनांचे कटाक्षाने पालन करावे.

\*रकाना क्रमांक १ मध्ये नमूद मतदान केंद्र परिच्छेद १०.११ प्रमाणे नमूद केलेप्रमाणे मतदान साहित्य वाटपाच्या वेळीच सांगितले जाईल.

स्थळ : देवरुख

दिनांक : २२/११/२०११



*(Signature)*  
जिल्हा निर्णय अधिकारी,  
तथा तहसिलदार संगमेश्वर(देवरुख)



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukha).

Sir, Medical  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Ms. J. V. Narote

Designation : Lab Technician

Reason : Medical reason

No. of Days Required : 10 On / From 24/07/2019 To 02/08/2019

Alternative Arrangements made:

1) Mrs. S. P. Mangle Sign. : [Signature]

2) Mrs. D. S. Panchal Sign. : [Signature]

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>ML -</u>	<u>10 days</u>	<u>medical leave</u>	<u>—————</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : Sadavali, 7770044659

Thanking You

Date : 09/08/2019

May be granted Medical leave

Remarks : He / She has got 10 days of Medical Leave

Your's faithfully

[Signature]

Principal 13/11

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir, Medical  
With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 09/08/2019 for 10 days  
on / from 24/07/2019 to 02/08/2019 I have joined my duties today the 06/08/2019

Your's faithfully

[Signature]

Principal 13/08  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



# SHREYAS HOSPITAL

2013-E-Ward, 6th Lane, Rajampuri Kolhapur - 416 008  
e-mail : shishir.jirge@gmail.com ☎ 0231-2520269, +91 7720072335

DR. SHISHIR JIRGE  
MS,MCh (Urology), DNB (Urology)  
CONSULTANT UROLOGIST & ANDROLOGIST  
Reg. No. 53587

DR. PADMA REKHA JIRGE  
M.B.B.S., M.R.C.O.G. (LONDAN) FICOG  
CONSULTANT GYNAECOLOGIST & OBSTETRICIAN  
FERTILITY SPECIALIST & ENDOSCOPIC SURGEON  
Reg. No. 91232

DATE 30/7/2019

## TO WHOM IT MAY CONCERN

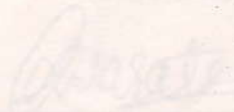
This is to certify that Mrs Juhi Gaurav Dongre age 28 years, was admitted 24/7/2019 for Laproscopy+removal of R ectopic+ R salpingostomy. She needs to rest from 24/7/2019 to 3 /8/2019.



Dr. Padma Rekha Jirge.  
MBBS,MRCOG(U.K), FICOG.  
Consultant Gynaecologist & Fertility

REK/ 13/08/19

JOINING REPORT





P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Tejaswi p. Chalke

Designation : Assistant Professor

Reason : Personal (marriage)

No. of Days Required : 10 On / From 1st/12/19 To 10/12/19

Alternative Arrangements made:

1) Mrs. N.M. Mulani Sign : [Signature]

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>SCL</u>	<u>15</u>	<u>10</u>	<u>Nil.</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : .....

Thanking You

[Signature]  
Your's faithfully

Date : 18/11/2019 (Tejaswi p. Chalke)

May be granted SCL

Remarks : He / She has got 14 days of SCL Leave

[Signature]  
Principal 19/11  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 18/11/2019 for 14 days on / from 17/12/2019 to 10/12/19 I have joined my duties today the 11/12/19

Your's faithfully

[Signature]

(Tejaswi p. Chalke)

[Signature]  
Principal

Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

॥ श्री गजानन प्रसन्न ॥ ॥ श्री वाघजाई देवी प्रसन्न ॥



स. न. वि. वि.

आमच्या येथे श्री कृपेकरून आमची सुकल्या

शि.सौ.कां. तेजस्वी

सुभेदार

(सौ. शिल्पा व श्री. प्रदीप गणपत चाळके (मिपुत आर्मी)  
यांची सुकल्या मु. पो. डिंगणी(चाळकेवाडी)

शि. मितीन

(सौ. सुषमा व श्री. शशिकान्त शिवराम नलावडे यांचा सुपुत्र  
मु. पो. करजुवे)

॥ यांचा शुभविवाह ॥

मिती मार्गशीष शुद्ध द्वितीया शके १९४१ गुरुवार  
दिनांक २८ नोव्हेंबर २०१९ रोजी दुपारी १२.२६ मी  
या शुभमुहूर्तावर करण्याचे योजिले आहे. तरी या  
मंगलप्रसंगी आपण सहकुटुंब सहपरिवार उपस्थित राहून  
वधू वरांस शुभाशिर्वाद घावेत हि नम विनंती.

आपले नम्र

सौ. संस्कृती व श्री. सुधिर प्रदीप चाळके

सौ. रिमा व श्री. राजेंद्र मनोहर जाधव

सौ. विशाखा व श्री. विनोद मारुती माने

सौ. मानसी व श्री. महेंद्र सखाराम जाधव

सौ. शुभदा व श्री. राजेश अनंत खामकर

सौ. मंदा व श्री महादेव श्रीराम जाधव

सौ. सुभद्रा व श्री. शंकर सयाजी मोरे

श्री. जगन्नाथ जयराम चाळके

श्री. शंकर सखाराम चाळके

सौ. सुवर्णा व श्री. मुरलीधर राजाराम चाळके

सौ. संगिता व श्री. अरविंद गंगाराम चाळके

सौ. वैशाली व श्री. विलास विष्णू चाळके

गं. भा. सुमित्रा गणपत चाळके

गं. भा. सुनिता आत्माराम चाळके

व्यवस्थापक

चाळकेवाडी विकास मंडळ

निमंत्रक

श्री. प्रथमेश राजेंद्र जाधव कु. विक्रान्त विनोद माने

समस्त चाळके, जाधव, माने, खामकर, परव, सावंत, कदम, त्रिद आणि परिवार

विवाहस्थळ

आंध्र महासभा हॉल, १० सी लक्ष्मी नापो रोड, किंग जॉर्ज  
हायस्कूलच्या समोर (राजे शिवाजी विद्यालय) दादर (पुर्व) मु. १४

स्वागत व रजेतु भाजन

दुपारी १ ते २.३० वाजेपर्यंत

सर्व विती सक्तानां ८.०० नंतर होल वर होतील

**BANK OF INDIA  
DEVRUKH BRANCH**

APPLICATION FOR NEFT / RTGS REMITTANCE

COUNTERFOIL Date : 19 08 20 19

Received from Principal, T.P. Sadavali

by Cash / Transfer / Cheque No. 080052

for RTGS / NEFT

Destination Bank's Name & Branch Union Bank  
of India, Sakri, Br.

IFSC Code No. : UBIN0566594

Name of the Beneficiary Earthnetic  
Enterprises Pvt. Ltd.

Account Number : 665901010050095

Amount in Words : Twenty one thousand  
One hundred fifty only

Amount in Figures 

						2	1	1	5	0
--	--	--	--	--	--	---	---	---	---	---

Charges 

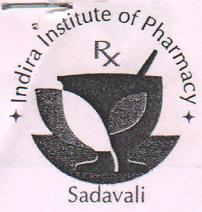
--	--	--	--	--	--	--	--	--	--	--

Total Rs. (Figures) 

						2	1	1	5	0
--	--	--	--	--	--	---	---	---	---	---

( In Words ) \_\_\_\_\_

Receiver's Signature



NAAC Accredited

206  
P.S.P Sanstha's  
Indra Institute  
of Pharmacy

A/P. - Sadavali (Devrukh)  
Tal. Sangameshwar,  
Dist. Ratnagiri - 415 804  
(Maharashtra)  
Phone: 02354-261799  
Fax : 02354-261499  
Email : info@iip.ind.in  
URL : www.iip.ind.in

Ref.No.:-IIP/PO/ 53/2019-20  
Date: 09/08/2019

To,  
M/S.Erthetic Enterprises Pvt.Ltd.  
A-17,Sankharam Ashish Building ,  
Shankarnagar,Sonarpada ,  
Dombivali(E)-421201

Sub:-Purchase order for Sanitary Napkin Disposal Machine.....Reg.

Dear dealer,

Adverting to above cited subject & your quotation EEPL/146,dated 01/08/2019,  
we are pleased to inform you that your quotation has been accepted for the supply of  
following materials.

Sr.No	Particulars	Qty.	Rate (Rs.)	Amount (Rs.)
1	Sanitary Napkin Disposal Machine	01	17500.00	17500.00
2	Ultra Thin Sanitary Napkin	100	5.00	500.00
			Total-	18000.00
			GST 18%-	3150.00
			Net Amount-	21150.00

Kindly arrange to supply above mentioned materials as per above specification at  
an early date.

**Terms & Conditions:**

- 1.F.O.R.at Indra Institute of Pharmacy, Sadavali.
2. Payment-100% advance NEFT deposited on your Account.  
(Ch.no.- Amount- /-, Date- )
3. The bill may be sent in triplicate in the name Indra Institute of  
Pharmacy, Sadavali. (GSTIN-27AAATP5904E1ZP )

Thanking you,

CHAIRMAN  
Prabodhan Shikshan Prasarak Sanstha's, Ambur for  
Indra Institute of Pharmacy, Sadavali





P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY**  
At & Po. Sadavali (Devrukh), Tal. Sangameshwar, Dist. Ratnagiri ☎ (02354) 241799

417

**DEBIT VOUCHER**

Vr. No. :

A/c. of \_\_\_\_\_

Date : 09/11/19.

To, Vijaykumar Madhavan Pilla.

Being	Rs.	Ps.
College staff Uniform and stitching charges paid	5660/-	
<b>SANCTIONED FOR PAYMENT</b>		
CH./D. D. No. 096780		
Dated : 09/11/19		
In words Rs. <u>five thousand six hundred sixty only</u>	TOTAL	5660/-

Prepared By [Signature]

Accountant [Signature]

Approved By [Signature]

Receiver's Signature [Signature]

STAMP



# VIJAY STICKING, Devrukh

Tahasil Road, Shivaji Chowk, Devrukh. Mob.: 9421228783

No. :

Name :

Date :

Delivery Date :

MONDAY CLOSE

डिलेव्हरी वेळ : दररोज सायंकाळी ०६.०० वा. नंतर  
२ महिन्यांच्या आत शिवलेले कपडे घेऊन जावेत.

Pant २ - ६६०  
Shirt २ - ३५०  
Jodhapuri -  
Safari -  
Salvar -  
Kurtha -

TOTAL Rs. ११००

Advance :

Balance Rs. : ११००

TIME DAILY ०८.३० to ०८.००

Prop. : M. Vijaykumar





# VIJAY STICKING, Devrukh

Tahasil Road, Shivaji Chowk, Devrukh. Mob.: 9421228783

No. : 900

Name : Indira Institute of

Date : Phomay Sadavali

Delivery Date :

**MONDAY CLOSE**

डिलेव्हरी वेळ : दररोज सायंकाळी ०६.०० वा. नंतर  
२ महिन्यांच्या आत शिवलेले कपडे घेऊन जावेत.

Pant 3	2640	Advance :	—
Shirt 3	1760	Balance Rs. :	4400/-
Jodhapuri		TIME DAILY	08.30 to 08.00
Safari		Prop. :	M. Vijaykumar
Salvar			
Kurtha			
<b>TOTAL Rs.</b>	<b>4400</b>		



for stitching charges  
of College of Arts Uniform.  
M. Paraskar



**Academic Year**  
**2018-2019**



**COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With ECR)  
EMPLOYEES' PROVIDENT FUND ORGANISATION**

TRRN: 3121811003758

Establishment Code & Name : PUKOL0101133000 RAJENDRA MANE COLLEGE OF  
Address : A/P. AMBAV., DEVRUKH., SANGMESHWAR., RATNAGIRI, MAHARASHTRA

Dues for the wage month of :October 2018

Total Subscribers : EPF 27      EPS 27      EDLI 27  
Total Wages : 2,88,800      2,88,800      2,88,800

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	1,444	0	0	0	1,444
2	Employer's Share Of Contribution	10,598	0	24,061	1,444	0	36,103
3	Employee's Share Of Contribution	34,659	0	0	0	0	34,659
<b>Grand Total : Seventy-Two Thousand Two Hundred Six Rupees Only</b>							<b>72,206</b>

**( Only for offline payment in case permitted by EPFO )**

**FOR BANKS USE ONLY**

Amount Received Rs. -----  
Date of presentation of Cheque/DD -----  
Date of Realisation of Cheque/DD -----  
SBI Branch Name -----  
SBI Branch Code -----

**FOR ESTABLISHMENT USE ONLY (To be manually filled by Employer)**

Cheque/DD No. ----- Date: -----  
Cheque/DD drawn bank &  
Name of the Depositor-----  
Date of Deposit----- Mobile No. -----  
Signature of the -----

(This is a system generated challan on 13-NOV-2018 11:05, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY and PMPRPY -

A) A/C no 1 (Employer share) ( Rs.) - 0  
B) A/C no 10 (Pension fund) ( Rs.) - 0  
C) Total (A + B ) ( Rs.) - 0  
D) Total remittance by Employer ( Rs.) - 72,206  
E) Total amount of uploaded ECR ( C + D ) ( Rs.) - 72,206



INR

<b>Reference No.</b>	CKH6831924
<b>Debit Account Number</b>	00000035486190349
<b>Debit Branch</b>	DEVROKH, RATNAGIRI
<b>Remarks</b>	
<b>Transaction Date</b>	13-Nov-2018
<b>Amount</b>	INR 72,206.00
<b>Status</b>	Success
<b>Reason</b>	Processed

300

दि. 29/09/2018

प्रति,  
मा. प्राचार्य,  
इंदिरा इन्स्टिट्यूट ऑफ फार्मसी,  
साडवली, (देवरुख).

विषय - अग्रिम रक्कम (अॅडवॉन्स) मिळण्याबाबत.....

अर्जदार - शेखर रामकृष्ण कोवळे

महोदय,

उपरोक्त विषयास अनुसरून मी आपल्या संस्थेत लायब्ररी क्लार्क या पदावर काम करित आहे. माझ्या आईला हृदयाचा तीव्र झटका आला असून तीची शस्त्रक्रीया झाली आहे, सदर खर्चासाठी मला १०,०००/- एवढ्या रकमेची आवश्यकता आहे. माझ्या पगारातून दर महा १,०००/- एवढी रक्कम कट करून घ्यावी.

तरी कृपया मला अॅडवॉन्स मिळावा या साठी मी तुमच्याकडे विनंती अर्ज करित आहे,

कळावे,

SANCTIONED FOR PAYMENT

CH./D. D. No. 060627

Dated: 28/9/18

आपला विश्वासू

*Shwale*

(शेखर रामकृष्ण कोवळे)

Forwarded to Hon. Chairman, P.S.P.S, Ambur for

favourable Consideration & necessary action

मा. प्राचार्य  
इ.प.म. वि. वि. म. कोवळे  
का. वि. वि. म. कोवळे

27/09/18  
to release Rs. 10000/- as advance w/p  
permission of Hon. Chairman  
27/09/18

06-09-2018	BI1320940	DAILY SAGAR	5,886.00		4,87,140.64CR
06-09-2018	8249177458	BUFI/824917745805/06-09-2		5,000.00	4,92,140.64CR
07-09-2018	BI37769	BY CASH-1440-DEORUKH		260.00	4,92,400.64CR
07-09-2018	BI691881	PRINCIPLE INDIRA INST CF		4,50,000.00	9,42,400.64CR
10-09-2018	BI180332	PRINCIPLE INDIRA INST CF			1,42,400.64CR
10-09-2018	BI183628	ZAPEKA N DALAVI		20,000.00	1,62,400.64CR
10-09-2018	BI210784	BY CASH-1440-DEORUKH		9,000.00	1,71,400.64CR
10-09-2018	BI267810	SWANAND MAGDOM			1,29,400.64CR
11-09-2018	BI269547	VAIBHAV DILIP JADHAV		10,000.00	1,19,400.64CR
11-09-2018	BI1503054	EDUCATION BOOK CENTER SAC		16,426.00	1,02,974.64CR
11-09-2018	BI1534763	MSEDCL		14,730.00	88,244.64CR
11-09-2018	BI42916514	LC CHQ 69384		10,000.00	98,244.64CR
14-09-2018	BI782038	MANDAR M PAVASKAR		35,143.00	96,522.64CR
14-09-2018	BI5887390	NEFTInward NEFT-ADLER MEDIEQUIP PRIV		30,000.00	1,32,065.64CR
15-09-2018	BI664964	LC CHQ 23690			1,62,065.64CR
17-09-2018	BI672701	KAI SAU MEENATAI THAKRE J		1,04,000.00	58,065.64CR
18-09-2018	BI370507	BY CASH-1440-DEORUKH		1,47,200.00	2,05,265.64CR
18-09-2018	BI734113	CR TO payee ACCT FOR DD		1,14,062.00	3,19,327.64CR
18-09-2018	BI752088	NEFTInward NEFT-SANTOSH C SHETYE		50,000.00	3,69,327.64CR
19-09-2018	BI771248	CR TO payee ACCT FOR DD		88,879.00	4,58,206.64CR
19-09-2018	BI7856857	BUFI/82621289026/19-09-2		8,000.00	4,66,206.64CR
21-09-2018	BI227394	BY CASH-1440-DEORUKH		28,500.00	4,94,706.64CR
21-09-2018	BI228232	SELF		27,256.00	5,21,962.64CR
24-09-2018	BI492375	SELF		5,000.00	5,16,962.64CR
24-09-2018	BI494569	LC CHQ 646743		12,000.00	5,04,962.64CR
24-09-2018	BI530388	LC CHQ 60824		46,200.00	5,51,162.64CR
24-09-2018	BI530388	PUDHARI PUBLICATIONS		83,095.00	6,34,257.64CR
24-09-2018	BI522490	JCS No. 4969605Br.14000		30,000.00	6,20,257.64CR
24-09-2018	BI5905901	Commission charges			6,50,427.64CR
25-09-2018	BI229613	COMPUTERS CONCEPTS		118.00	6,46,909.64CR
25-09-2018	BI410967	AO BSNL		3,518.00	6,50,427.64CR
25-09-2018	BI410967	AO BSNL		63,278.00	5,83,631.64CR
25-09-2018	BI789665	LC CHQ		1,138.00	5,82,493.64CR
25-09-2018	BI789665	LC CHQ 957460		1,08,320.00	6,90,813.64CR
26-09-2018	BI229058	KAI SAU MEENATAI THAKAPE		43,256.00	7,34,069.64CR
26-09-2018	BI302176	BY CASH-1440-DEORUKH		22,000.00	7,12,069.64CR
26-09-2018	BI5102986	IMPS/RRN: 826915767690/MO		1,700.00	7,13,769.64CR
27-09-2018	BI705143	DD ON MUMBAI SERVICE		10,000.00	7,23,769.64CR
28-09-2018	BI254878	ATHARVA ELECTRICALS		600.00	7,23,169.64CR
29-09-2018	BI487460	CR TO payee ACCT FOR DD		55,256.00	7,17,912.64CR
29-09-2018	BI630701	KOVALE SHEKHAR			7,73,168.64CR
29-09-2018	BI20409376	JCS No. 4984227Br.14000		60,000.00	7,63,168.64CR
29-09-2018	BI2040928	Commission charges		236.00	8,23,168.64CR
01-10-2018	BI187842	TO SWAMI SAMARTH COMPUTER		7,430.00	8,22,932.64CR
01-10-2018	BI600517	MAITRI PETROL PUMP		41,288.00	8,15,502.64CR
03-10-2018	BI331068	SELF		10,000.00	7,74,214.64CR
03-10-2018	BI860977	LC CHQ 55246		20,000.00	7,64,214.64CR
03-10-2018	BI2513306	IMPS/RRN: 827510645397/MO		8,000.00	7,84,214.64CR
03-10-2018	BI36766411	NEFTInward NEFT-POOJA JAGANNATH BAVK		30,000.00	7,92,214.64CR
04-10-2018	BI739223	SUJIT K NAGARE		50,000.00	8,22,214.64CR
					7,72,214.64CR



Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Chiplun Urben Co-op Bank Ltd  
Loan Installment List SEPTEMBER 2018

Sr. No.	Name of Employee	A/c No.	Loan Amt	Installment
1	Mr. Rakesh Ganpat Jangam	1056	100,000.00	2600.00
			Total	2600.00

Cheque No.	Date	Amount
039928	01/11/18	2600.00

  
Principal  
Indira Institute of Pharmacy,  
Sadavali (Devrukh)

Received  
01/11/18  


**State Bank of India**  
 भारतीय स्टेट बैंक / बैंक

DEVRUKH / देवरुख BRANCH शाखा (1105)

Date / दि. : 3/8/2008

A/C No. 30366357906

For the credit of Dr. Santosh G. Jadhav  
 के खाते में जमा करने हेतु

Amount (in words) Rupees Two lakh Ninety  
 हजारों में Four thousand seven hundred

Details of Cash / <del>चुके</del> रोकट / चेकी का विवरण	Rs.	Ps.
<u>BOI, Darykh</u>	<u>274,798/-</u>	
<u>Ch No 062122</u>		
कुल राये Total Rs.	<u>274,798/-</u>	

Cashier / चेकीद्वारा	Cash Officer / Passing Officer रोकट / पासकर्ता अधिकारी
----------------------	---

166

Date: 05/07/2018

To,  
The Principal  
PSPS's  
Indira Institute of Pharmacy  
Sadavali.

**SANCTIONED FOR PAYMENT**

CH./D.D. No. 062/22

Dated: 31/07/2018.

Sub: Requesting for Gratuity payment of 3, 23, 382.00

Ref: IIP/Gen/302/21/01/2018

Respected sir,

Adverting to the subject and reference cited above, I am Dr. Santosh Govindrao Jadhav. As you said that you will be pay gratuity amount in June month. Therefore I would like to give the remainder of gratuity payment. The gratuity amount is to be 3, 23, 382.00 as per gratuity act 1972. This amount can either directly deposit into my account or send a cheque/demand draft to my postal address given below. Gratuity calculation is given as follows, so kindly give the gratuity payment as earliest.

**Gratuity Calculation**

Last month withdrawn salary X No of years service X 15

26

$62,281 \times 9 \times 15 = 3,23,382$

26

Gratuity amount is to be 3, 23, 382.00

**For online Payments Details:**

Name: Santosh Govindrao Jadhav  
Saving Account No: 30366357906  
Branch Name: SBI, Baramati  
IFSC: SBIN0000321

**Postal Address**

Dr. Santosh Govindrao Jadhav  
Flat No.101, D Wing, First Floor,  
Nirmiti Vihar, Gate no. 38  
Behind VP Engineering College  
opposite abhimanyu nagri,  
Baramati - 413102, Dist: Pune

Thanking you in anticipation.

From,

*[Signature]*

Dr. Santosh Govindrao Jadhav

Forwarded to Hon Chairman, PSH  
for information & necessary action.

Date of joining - 01/08/2008  
Date of resignation - 31/07/2017.  
Total years of service - 09 yrs.

Last salary drawn.

Basic - Rs. 30,770/-  
DA - Rs. 22,154/-  
Total Rs. 52,924/-

Gratuity Calculation.

$\frac{52,924 \times 15}{26} \times 9 = 2,74,798/-$

(Rs. Two Lakh Seventy Four thousand.  
Seven hundred ninety eight only).

*[Signature]*  
(Pranod Surve)

Office of the Principal  
Indira Institute of Pharmacy, Sadavali.

Inward No : - 16  
Date : - 11/07/2018  
Referred To : - Personal file  
Signature : - *[Signature]*





P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for <sup>medical</sup> Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mr. A. K. Gurav

Designation : Peon

Reason : Suffering from LRTI & fever

No. of Days Required : 05 On / From 19/01/2019 To 23/01/2019

Alternative Arrangements made:

1) Rakesh. G. Sangam Sign : [Signature]

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in aYear)				
<del>meti</del> ML - 05 day medical leave				<u>[Signature]</u>

Address & Contact Nos. while on leave : Devrukh, 9421441781

Thanking You [Signature] J.V. Nante. [Signature] Nagare Sir  
Your's faithfully [Signature]  
(Mr. A. K. Gurav)

Date : 24/01/2019

May be granted medical leave

Remarks : He / She has got 05 days of medical Leave  
Principal [Signature] 24/01  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
With reference to my <sup>medical</sup> Casual / Special Casual\* / Duty leave \*\* application dated 24/01/2019 for 05 days on / from 19/01/2019 to 23/01/2019 I have joined my duties today the 24/01/2019

Your's faithfully [Signature]  
(Mr. A. K. Gurav)

Principal [Signature] 24/01  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

# Omkar Clinic

Opp. Kanya Shala, Devrukh.  
Tal. Sangameshwar, Dist. Ratnagiri.  
Mob. : 9421136423



Dr. Shashank V. Tikekar  
B. H. M. S. (Pune)  
Reg. No. 32502

Dr. Mrs. Gouri S. Tikekar  
B. A. M. S. (Mumbai)  
Reg. No. I-45845-A

Medical Certificate

22/01/2019

This is to certify that  
Mr. Anil Krishna Gaurav 20/48y is  
suffering from LRTI + Flu from 19/01/2019  
till date. He is advised rest till tomorrow  
i.e. 23/01/2019.

He is fit to resume  
his duties from 24/01/2019.

*Dr. Shashank V. Tikekar*  
24/01/19

*Dr. Shashank V. Tikekar*  
Dr. Shashank V. Tikekar  
B.H.M.S.(Pune)  
Reg. No. 32502

Mob. 9422038451

Mob. 9850040215

CASH / CREDIT MEMO

# BALAJI UNIFORMS

462, Shaniwar Peth, Gala No.12, Kolhapur Naka, Karad Dist- Satara 415110  
Suppliers in Collage & School Dress Codes, Dress Material, industrial Uniforms

Mrs. Indira Institute of Pharmacy  
Sadavali

Bill No. **060**  
Date: 17/8/18

No	Particulars	Rate	Amount
①	महामास फेब्रिक = 26. अडस से ड्रेस.		
②	महामास फेब्रिक इ मर्यादात फेब्रिक = 4		
	<u>30</u>	500.00	15000.00
<b>Bill Recorded</b>		<b>TOTAL</b>	15000.00

Rupees पंधरा हजार सात वान.

Receiver's Signature's

[Signature]  
For- BALAJI UNIFORMS



Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Tal: Sangameshwar, Dist. Ratnagiri Pin- 415 804.

(Approved By: AICTE & PCI, New Delhi, D.T.E., Govt. of Maharashtra & Affiliated to University of Mumbai)

Phone: 02354-261799, Fax: 02354-261499, E-mail: info@ip.ind.in URL: www.ip.ind.in

"Inculcating true values Disseminating eternal knowledge"

Ref. No. IIP/A/c./2018-19

Date – 27/09/2018

To,  
**Balaji Uniforms,**  
Gala No. 12, Near Gandhi Putala,  
Kolhapur Naka, Karad,  
Dist – Satara 415110.

Sir,

I am sending herewith **cheque No. 060626** dated **27/09/2018** drawn on Bank of India, Devrukh Branch for **Rs. 49,600/-** (Rupees Forty Nine Thousand Six Hundred only) towards payment of your Invoices as detailed under -

Sr. No.	Invoice No. & Date	Amount
1.	063 – 18/08/2018	34,600.00
2.	060 – 17/08/2018	15,000.00
<b>Total Rs.</b>		<b>49,600.00</b>

Kindly acknowledge the receipt of the same.

Thanking you,

Yours Sincerely,

*[Signature]*  
Principal 28/09/18  
Indira Institute of Pharmacy,  
Sadavali (Devrukh)

बैंक ऑफ इंडिया  
Bank of India



देवुरुख शाखा, रत्नागिरी, महाराष्ट्र - 415804  
DEORUKH Branch, RATNAGIRI, MAHARASHTRA - 415804  
IFSC : BKID0001440

जारी करने की तारीख से 3 माह के लिए वैध VALID FOR 3 MONTHS FROM THE DATE OF ISSUE

27092018  
D D M M Y Y Y Y

या धारक को Or Bearer

Pay **Balaji Uniforms**

रुपये Rupees **forty Nine thousand six hundred only**

अदा करें ₹ **49,600/-**

खा.सं.  
A/c No. **144010110001260**

चेक प्राप्तकर्ता की आधार संख्या (वैकल्पिक) Cheque receiver's AADHAAR number (optional)

--	--	--	--	--	--	--	--	--	--

*[Signature]*  
Treasurer

*[Signature]*  
Chairman

PRINCIPAL INDIRA INSTITUTE OF PHARMACY SADAVALI

हमारी सभी शाखाओं पर समाशोधन में देय PAYABLE AT ALL OUR BRANCHES IN CLEARING Please sign above



P. S. P. S's

# INDIRA INSTITUTE OF PHARMACY, SADAVALI. LEAVE APPLICATION

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty/leave\*\* giving the following particulars :

Name of the Applicant : Mr. V.S. Kulkarni

Designation : Asst Professor

Reason : Personal

No. of Days Required : 02 On / From 15/12/18 To 17/12/18

Alternative Arrangements made: kluleth

1) ..... Sign : .....

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)	<u>9</u>	<u>2</u>	<u>7</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : 9421141242

Thanking You

Your's faithfully

Date : 14/12/18

([Signature])

May be granted 02 days

Remarks : He / She has got 02 days of Casual Leave

[Signature]  
Principal  
Indira Institute of Pharmacy, Sadavali

## JOINING REPORT

Sir,  
With reference to my Casual / Special Casual\* / Duty/leave \*\* application dated 14/12/18 for 02 days on / from 15/12/18 to 17/12/18 I have joined my duties today the 18/12/18

Your's faithfully

[Signature]  
Principal  
Indira Institute of Pharmacy

([Signature])

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



**P. S. P. S's**  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Maternity Leave / Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mrs. Asmita Surendra Jadhav.

Designation : Lab Technician

Reason : maternity Leave

No. of Days Required : 6 months On / From 19/05/2019 To 31st Nov 2019.

Alternative Arrangements made:  
Durva Satish Panchal Sign : [Signature]  
S.P. Mangale Sign : [Signature]

Mr. Milind Gokhale Sign : [Signature]  
Ms. Juhi V. Narote Sign : [Signature]

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>Maternity leave - 6 months</u>				<u>[Signature]</u>

Address & Contact Nos. while on leave : slp. palgaon / manchund, AH48289282  
8653886657.

Thanking You  
Yours faithfully  
[Signature]  
(Mrs. A.S. Jadhav)

May be granted M.L.  
Remarks : He / She has got 6m 11 do days of maternity Leave  
Principal  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 11/1/2020 for 6 months 11 days  
on / from 19th may 2019 to 31st Dec 2020 I have joined my duties today the 11/1/2020

Your's faithfully  
[Signature]  
(Mrs. A.S. Jadhav)

Principal  
Indira Institute of Pharmacy  
06/01/2020

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

Mrs. Asmita Surendra Jadhav  
Lab technician,  
Indira Institute of Pharmacy,  
Sadavali  
Date: 26/04/2019

To,  
Principal  
Indira Institute of Pharmacy, Sadavali

Sub: About Maternity Leave .....

Respected Sir,

I am Mrs. Asmita Surendra Jadhav working as Lab technician in your institute since 01st July 2016. As per cited in above, I expecting my delivery on first week of June 2019, so herewith I am applying for maternity leave from 19<sup>th</sup> may 2019 to 31st November 2019 .

So please kindly consider the application and do the needful

Thanking you.

Yours faithfully,



(Mrs. Asmita Surendra Jadhav)

To be considered as per procedure  
Name as per procedure

Recd  
26/04/19



**P. S. P. S's**  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
 The Principal,  
 Indira Institute of Pharmacy,  
 Sadavali (Devrukh).

Sir,  
 I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mr. Nagare S.K  
 Designation : Asst. Prof  
 Reason : To attend Campaign at sawantwadi/vegnita/malvan on 05/06 Dec. 18  
10 & 11 Dec 2018 - Alibaug / 13/12/18 - Kankarali  
 No. of Days Required : 07 On / From 05, 06, 07, 08,  
10, 11 and 13 December 2018  
 Alternative Arrangements made:

- 1) Mr. B.C. Hatapalki Sign : [Signature]  
 2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				

Address & Contact Nos. while on leave : Mr. Nagare S.K 7588177050

Thanking You  
 Date : .....  
 May be granted DL  
 Remarks : He / She has got 07 days of Duty Leave  
 Your's faithfully  
[Signature]  
 Principal  
 Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
 With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 03/12/18 for 07 days on / from 05-08 to ..... I have joined my duties today the 14/12/18  
10-11 and 13 December 2018  
 Your's faithfully  
[Signature]  
 Principal  
 Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection conference Regn. Letter etc.)





P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Shekhar R. Kovale  
Designation : Library  
Reason : marriage leave  
No. of Days Required : 07 On / From 20/05/2019 To 27/05/2019

Alternative Arrangements made:

1) Mr. Y.M. Jadhav Sign : [Signature] 20/05/2019  
2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>SCL</u>	<u>10</u>	<u>8</u>	<u>2</u>	<u>[Signature]</u>

Address & Contact Nos. while on leave : HP. Kosumb, 9970396828

Thanking You  
Your's faithfully  
[Signature]  
(Shekhar R. Kovale)

Date : 20/05/2019  
May be granted SCL  
Remarks : He / She has got 08 days of SCL Leave  
Principal [Signature] 31/5  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,  
With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 20/05/2019 for 08 days on / from 20/05/2019 to 28/05/2019 I have joined my duties today the 28/05/2019

Your's faithfully  
[Signature]  
(Shekhar R. Kovale)

Principal [Signature] 31/5  
Indira Institute of Pharmacy

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

॥ श्री गणेशाय नमः ॥

॥ श्री महालक्ष्मी प्रसन्न ॥ श्री भैरीभवानी प्रसन्न ॥

॥ श्री जुगाई प्रसन्न ॥ श्री राम प्रसन्न ॥

सप्रेम नमस्कार वि. वि आमचे येथे श्री कृपेकरून आमचा पुत्र

**चि. शेखर**

(श्री. रामकृष्ण रघुनाथ कोवळे रा. कोसुंब (रामवाडी) ता. संगमेश्वर, जि. रत्नागिरी याचा द्वितीय पुत्र)



आणि



चि. सौ. कां. **संपदा**

(श्री. विनायक बाळकृष्ण पेनकर रा. कोसुंब (तांबटवाडी) ता. संगमेश्वर, जि. रत्नागिरी यांची कन्या)

॥ यांचा शुभविवाह ॥

मिती वैशाख कृष्ण ५ शके १९४१, गुरुवार दि. २३ मे २०१९ रोजी सायं. ४ वा. ४० मि.

या शुभ मुहुर्तावर करण्याचे योजिले आहे. कार्य सिद्धीस नेण्यास श्री समर्थ आहेत.

जोडी बनवली देवांनी, सिद्धीस नेले माता-पित्यांनी, सुगंधले घर हळद-उटण्यांनी, मांडव ही सजला पाहुण्यांनी, सनई चौघड्यांच्या सुरांनी, सप्त पदिच्या पाऊलांनी, वधु-वरास शुभाशिर्वाद देऊन, विनंतीस मान द्या लग्नाला येऊनी...

**\* आपले नम्र \***

श्री. रामकृष्ण रघुनाथ कोवळे

सौ. रजनी रामकृष्ण कोवळे

॥ वरील विनंतीस मान देऊन अगत्य येण्याची कृपा करावी. ॥

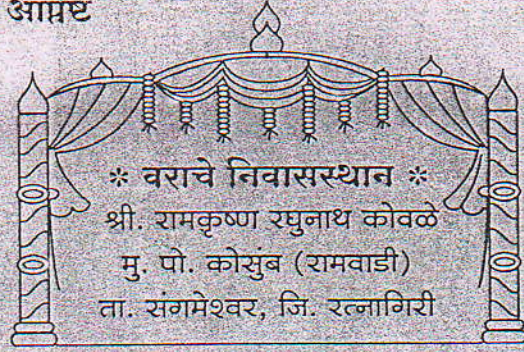
श्री. सुर्यकांत दिगंबर वडके

सौ. सुजाता सुर्यकांत वडके

श्री. प्रसाद एकनाथ राणे

सौ. प्रिया प्रसाद राणे

समस्त कोवळे, पेनकर, वडके, राणे, पोटफोडे, पुरोहित, पिंपळे, बोथरे  
मुळे, डेरे परिवार आणि आप्तेष्ट



**\* श्री सत्यनारायण पूजा \***

शुक्रवार दि. २४ मे २०१९ रोजी  
सायं. ४ ते ८ वा.

**\* स्वागत समारंभ \***

सायं. ४.०० ते ६.०० वा.

**\* निमंत्रक \***

राकेश रामकृष्ण कोवळे  
मो. ९५५२८०३३९०/९९७०३९६८२८

**\* आमच्या मामाच्या लग्नाला यायचं हं! \***

कु. शिवानी, साहिल

अमृत प्रिंटर्स, ता. महाने/८३७९९५५०९९

**VIJAY STICHING, Devrukh.** ☎ 9421228783

No. :

7695

SHIVAJI CHOWK, Tahasil Road, Near Taluka School, Tal. Sangameshwar.

Name : *Indira Institute of Pharmacy*  
*Sachavali*Date : *12/08/2018*Delivery Date : *29/08/2018***MONDAY CLOSE**डिलेव्हरी वेळ : दररोज सायंकाळी ०६.०० वा. नंतर  
२ महिन्यांच्या आत शिवलेले कपडे घेऊन जावेत.

Pant 29 -	8700/-	Advnce
Shirt 29 -	5800/-	
Jodhapuri Embroidery Safari -	2900/-	Balance Rs. 17400/-
Salvar -		TIME DAILY 08-30 TO 08-00
Kurtha -		
<b>TOTAL Rs.</b>	<b>17400/-</b>	Prop. <i>M. Vijaykumar</i>



बैंक ऑफ इंडिया  
Bank of India



देवरुख शाखा, रातनागिरी, महाराष्ट्र - 416804  
DEORUKH Branch, RATNAGIRI, MAHARASHTRA - 416804  
IFSC : BKID0001440

वैध करने की अवधि से 3 माह के लिए वैध VALID FOR 3 MONTHS FROM THE DATE OF ISSUE

08 10 2018  
D D M M Y Y Y Y

Pay Vijaykumar M. Pilla

या धारक को Or Bearer

रुपये Rupees Seventeen thousand four hundred only

अदा करें। ₹ 17400/-

अ/c नं.  
A/c No. 144010110001260

चेक धारक की अनाम संख्या (वैकल्पिक) Cheque receiver's AADHAAR number (optional)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Treasurer  
PRINCIPAL INDIRA INSTITUTE OF PHARMACY SADAVALI  
Chairman  
Indira Institute of Pharmacy Sadavali

हमारी सभी शाखाओं पर समतोलन में देय PAYABLE AT ALL OUR BRANCHES IN CLEARING

⑈060643⑈ 415013542⑈ 000309⑈ 10

श्री अक्षी बैं. भास्कर

**Academic Year**  
**2017-2018**



COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With ECR)  
EMPLOYEES' PROVIDENT FUND ORGANISATION

TRRN: 3121711004679

Establishment Code & Name : PUKOL0101133000 RAJENDRA MANE COLLEGE OF  
Address : A.P. AMBAV., DEVRUKH., SANGMESHWAR., RATNAGIRI, MAHARASHTRA

Dues for the wage month of :October 2017

Total Subscribers : EPF EPS EDLI  
26 26 26  
Total Wages : 2,79,145 2,79,145 2,79,145

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	1,814	0	0	0	1,814
2	Employer's Share Of Contribution	10,245	0	23,255	1,396	0	34,896
3	Employee's Share Of Contribution	33,500	0	0	0	0	33,500
Grand Total : Seventy Thousand Two Hundred Ten Rupees Only							70,210

( Only for offline payment in case permitted by EPFO )

FOR BANKS USE ONLY

Amount Received Rs. \_\_\_\_\_  
Date of presentation of Cheque/DD \_\_\_\_\_  
Date of Realisation of Cheque/DD \_\_\_\_\_  
SBI Branch Name \_\_\_\_\_  
SBI Branch Code \_\_\_\_\_

FOR ESTABLISHMENT USE ONLY

(To be manually filled by Employer)  
Cheque/DD No. \_\_\_\_\_ Date: \_\_\_\_\_  
Cheque/DD drawn bank &  
Name of the Depositor \_\_\_\_\_  
Date of Deposit \_\_\_\_\_ Mobile No. \_\_\_\_\_  
Signature of the \_\_\_\_\_

(This is a system generated challan on 14-NOV-2017 12:45, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.)

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY and PMPRPY -

A) A/C no 1 (Employer share) ( Rs.) - 0  
B) A/C no 10 (Pension fund) ( Rs.) - 0  
C) Total ( A + B ) ( Rs.) - 0  
D) Total remittance by Employer ( Rs.) - 70,210  
E) Total amount of uploaded ECR ( C + D ) ( Rs.) - 70,210



INR

<b>Reference No.</b>	CKE1207590
<b>Debit Account Number</b>	00000035486190349
<b>Debit Branch</b>	DEVROKH, RATNAGIRI
<b>Remarks</b>	
<b>Transaction Date</b>	14-Nov-2017
<b>Amount</b>	INR 70,210.00
<b>Status</b>	Success
<b>Reason</b>	Processed

प्रती,

दि. १/०५/२०१७ ९०

चेभरमन गोहव  
इंदिरा इन्स्टीट्यूट ऑफ जामसी  
साउवली

अर्जदार :- दत्ताराम महादेव लिंगायत

विषय :- अग्रिम (अॅडव्हान्स) रक्कम मिळणेबाबत

महोदय,

मी आपल्या संस्थेमध्ये शिपाई या पदावर  
कार्यरत असून माझ्या घरामध्ये मंगलकार्य आहे.  
माझ्या पुतण्याच्या लग्नासाठी मला रुपये १०,०००/-  
इतक्या रकमेची आवश्यकता आहे. सदर रक्कम  
माझ्या पगारापोरी अॅडव्हान्स म्हणून मिळावी व दरमहीना  
रु. १०००/- प्रमाणे माझ्या पगारातून संस्थेला जमा  
कारण्यात यावी ही नम्र विनंती

आपला विश्वासू

द.म. लिंगायत

दत्ताराम महादेव लिंगायत

Forwarded to

11/5

SANCTIONED FOR PAYMENT

CH./D. D. No. 027 486

Dated: 15/05/2017



VC PAYEE ONLY

बैंक ऑफ इंडिया  
Bank of India **BOI** 

देवरुख शाखा, रत्नागिरी, महाराष्ट्र - 415804  
DEORUKH Branch, RATNAGIRI, MAHARASHTRA - 415804  
IFSC : BKID0001440

व्यक्ति करने की तारीख से 3 माह के लिए वैध VALID FOR 3 MONTHS FROM THE DATE OF ISSUE

15 05 20 17  
D D M M Y Y Y Y

12007408  
05-01-2017

Pay Mr. D. M. Lingayat


या धारक को Or Bearer

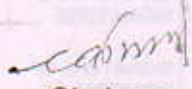
रुपये Rupees Ten thousand only

अदा करें। ₹ 10,000/-

खा.सं.  
A/c No. 144010110001260

बैंक धारक की अन्वय संख्या (वैकल्पिक) Cheque receiver's AADHAAR number (optional)

  
**Treasurer**  
PRINCIPAL INDIRA INSTITUTE OF PHARMACY SADAVALI  
Indira Institute of Pharmacy, Sadavali

  
**Chairman**

हमारे सभी शाखाओं पर समतोल धन में देय - PAYABLE AT ALL OUR BRANCHES IN CASH

⑈027486⑈ 415013542⑈ 000309⑈ 10

SESHABAI (M)/C19-2010

15-05-2017	B1758620	DR D M LINGAYAT	10,000.00	1,42,673.18CR
16-05-2017	B1599599	MAHARASHTRA STATE ELECTRICI	3,460.00	1,39,213.18CR
16-05-2017	S5461797	rujuda enterprises	2,625.00	1,36,588.18CR
17-05-2017	B183895	DHEERAJKUMAR B LODHA	464.00	1,36,124.18CR
17-05-2017	S8824126	ATHARVA ENTERPRISES	3,690.00	1,32,434.18CR
18-05-2017	B1209975	BY CASH-1440-DEORUKH		1,35,007.18CR
18-05-2017	B1548193	BY CASH-1440-DEORUKH		1,55,907.18CR
19-05-2017	S2710455	NEFT-ADLER MEDIEQUIP PRIV	5,071.00	1,75,842.18CR
20-05-2017	B1127410	ACCOUNTS OFFICER BSNL	980.00	1,70,771.18CR
20-05-2017	B1225963	SAIRAJ XEROX CENTER		1,69,791.18CR
20-05-2017	B1474874	BY CASH-1440-DEORUKH		1,72,893.18CR
20-05-2017	S5834460	NEFT-JOINT DIRECTOR TECHN	10,700.00	1,83,593.18CR
23-05-2017	B1226106	BIYANI TECHNOLOGIES	40,000.00	1,43,593.18CR
26-05-2017	B1178038	SUJIT K NADARE	1,954.00	1,41,639.18CR
29-05-2017	B1527977	PRASAD FOOD MALL	897.00	1,40,742.18CR
29-05-2017	S7470975	GHANEKAR	4,475.00	1,36,267.18CR
30-05-2017	S9780628	NEFT-ADLER MEDIEQUIP PRIV	46,935.00	1,83,202.18CR
06-06-2017	B1384205	D. D. SPARE	2,230.00	1,80,972.18CR
09-06-2017	S8216127	PUDHARI PUBLICATIONS	2,145.00	1,78,827.18CR
12-06-2017	B1290564	POSTAGE CHARGES	30.00	1,78,797.18CR
12-06-2017	B1290564	POSTAGE CHARGES	30.00	1,78,767.18CR
12-06-2017	B1526595	POSTAGE CHARGES	30.00	1,78,737.18CR
12-06-2017	B1526595	POSTAGE CHARGES	30.00	1,78,707.18CR
12-06-2017	B1594124	SELF	10,000.00	1,68,707.18CR
12-06-2017	B1638674	POSTAGE CHARGES	30.00	1,68,677.18CR
12-06-2017	B1638674	POSTAGE CHARGES	30.00	1,68,647.18CR
12-06-2017	B1638674	POSTAGE CHARGES	30.00	1,68,617.18CR
14-06-2017	B1452705	BY CASH-1440-DEORUKH		1,69,917.18CR
14-06-2017	S9980542	MAX PRINT SERVICES	3,850.00	1,66,067.18CR
15-06-2017	S3624225	NEFT-ADLER MEDIEQUIP PRIV	30,078.00	1,96,145.18CR
20-06-2017	B1500225	BY CASH-1440-DEORUKH	300.00	1,96,445.18CR
20-06-2017	B1541186	SAU MEENATAI THANKARE SADA	27,000.00	1,69,445.18CR
21-06-2017	B1510172	VIABHAV V SHINDE	950.00	1,68,495.18CR
21-06-2017	B1512899	MAJURESH S BHOPALKAR	2,380.00	1,66,115.18CR
21-06-2017	B1544372	BOI	1,968.00	1,64,147.18CR
23-06-2017	B187272	A/C OFFICER BSNL	4,919.00	1,59,228.18CR
23-06-2017	B1317879	PROBITS SERVICES	19,300.00	1,39,928.18CR
27-06-2017	B1231286	MANDAR M. PAVASKAR	1,321.00	1,38,607.18CR
27-06-2017	B1549036	PRINCIPAL INDIRA INST. OF		1,88,607.18CR
27-06-2017	B1572838	BY CASH-1440-DEORUKH		2,09,207.18CR
27-06-2017	B1640833	DD ON NEW DELHI SERVICE	1,00,000.00	1,09,207.18CR
27-06-2017	S1629145	NEFT-ADLER MEDIEQUIP PRIV		1,39,285.18CR
28-06-2017	B1799989	LC 35/763 CHO NO 866151		1,61,035.18CR
29-06-2017	B1528959	BY CASH-1440-DEORUKH	300.00	1,61,335.18CR
03-07-2017	B1592408	BY CASH-1440-DEORUKH		1,84,936.18CR
04-07-2017	B1320264	BY CASH-1440-DEORUKH	41,900.00	2,26,836.18CR
05-07-2017	B1127582	BY CASH-1440-DEORUKH	39,366.00	2,66,202.18CR
05-07-2017	B1570203	MSEDCL	8,270.00	2,57,932.18CR
06-07-2017	B1546599	BASHTE ANKITA SANTOSH	9,700.00	2,48,232.18CR
07-07-2017	B1381551	LC CHQ 646 1C833		2,98,232.18CR
07-07-2017	B1395399	LC CHQ 33278 LC 810		3,33,212.18CR



Prabodhan Shikshan Prasarak Sanstha's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Chiplun Urben Co-op Bank Ltd  
Loan Installment List SEPTEMBER 2017

Sr. No.	Name of Employee	A/c No.	Loan Amt	Installment
1	Mr. Anand M. Shinde	1004	100,000.00	2500.00
2	Mr. Rakesh Ganpat Jangam	1056	100,000.00	2600.00
			Total	5100.00

Cheque No.	Date	Amount
028967	09/10/2017	5100.00

*Handwritten notes in red ink:*  
K. K. K.  
g. 10/10/17  
P. P.



*Handwritten signature in blue ink:*  
Principal 09/10/17

Principal  
Indira Institute of Pharmacy,  
Sadavali (Devrukh)



P.S.P Sanstha's  
Indira Institute  
of Pharmacy

A/P. - Sadavali (Devrukh)  
Tal. Sangameshwar,  
Dist. Ratnagiri - 415 804  
(Maharashtra)  
Phone: 02354-261799  
Fax : 02354-261499  
Email : info@iip.ind.in  
URL : www.iip.ind.in

Ref No: IIF/App./ 72 /2017-18

Date: 21<sup>st</sup> August 2017.

To,

**Dr. Prajakta V. Kulkarni**  
Savitri Sadan, Opp.maruti Mandir  
Near Rural Hospital,  
Devrukh, Tal. Sangameshwar, Dist. Ratnagiri.

Sub : Appointment to the post of Part Time Physician at Indira Institute of Pharmacy, Sadavali, Tal- Sangameshwar, Dist- Ratnagiri.

With reference to your application dated 08/08/2017, I have pleasure to inform you that you are hereby appointed as **Part Time Physician** at Indira Institute of Pharmacy, Sadavali.

1. Your appointment is subject to the conditions, rules and regulations as prescribed by the Institution/Sanstha from time to time.
2. You will be paid contractual salary of Rs.7000/- (Rs. Seven Thousand only) per month excluding summer and winter vacation periods.
3. Your working hours will be from 6.00 p.m. to 8.00 p.m. on Tuesday, Thursday and Saturday of every week.
4. This is a contract position and your appointment will be for the period w.e.f. 01/09/2017 till further orders.
5. The vacation period will be informed by the Institute from time to time.
6. Your service may be terminated without any notice and without assigning any reason, in the event it is observed that your service is not satisfactory and/or your behavior is not up to the mark in the interest of the Institute/Sanstha.
7. Your continuous unauthorized absence will lead to termination of your service, effective from the date from which you may remain absent from duties.
8. Please sign the on duplicate copy of this letter to indicate your acceptance of this office.

*Prajakta V. Kulkarni*  
Dr. Prajakta V. Kulkarni



*Prabodhan*

Chairman  
Prabodhan Shikshan Prasarak Sanstha  
Ambav



DEPOSIT / PAY IN SLIP

Branch : Deo

Date : 7/1/2022

SB/CA/RD/OD/CC/TL/DLA/c No./Credit Card No.

20419220592

Name Dr. Prajakta V. Kulkarni

Tel. No.

Amount ₹ 12600/- P.

Rupees in words Twelve thousand six hundred

Cash/Cheque No./Date & Name of Bank & Branch	₹	P.
<u>207 Deo</u>	<u>12600/-</u>	
<u>155289</u>		
Total	<u>12600/-</u>	

SWO / Passing Officer

SBI toll free, 24 Hours Call Centre  
No. 18004253800, 1800112211



**Prabodhan Shikshan Prasarak Sanstha's  
INDIRA INSTITUTE OF PHARMACY, SADAVALI**

Tal: Sangameshwar, Dist. Ratnagiri Pin- 415 804.

(Approved By: AICTE & PCI, New Delhi, D.T.E., Govt. of Maharashtra & Affiliated to University of Mumbai)

Phone: 02354-261799, Fax: 02354-261499, E-mail: info@iip.ind.in URL: www.iip.ind.in

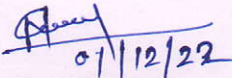
"Inculcating true values Disseminating eternal knowledge"

Date: 07/12/2022

The statement showing the payment of visiting honorarium to Dr. Prajakta V. Kulkarni, Part Time Physician, for hostel as per below details:.

Sr. No.	Name & Address	Month	Particular	Honorarium	Remark
01.	Dr. Prajakta V. Kulkarni, Part Time Physician.	Oct. - 2022	Honorarium as Part Time Physician for Hostel	7,000.00	Satisfactory
		Nov. - 2022		7,000.00	
<b>Sub total Rs.</b>				<b>14,000.00</b>	
<b>10 % TDS</b>				<b>1,400.00</b>	
<b>Total amount Paid</b>				<b>12,600.00</b>	

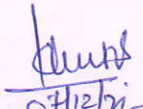
Rupees Twelve thousand six hundred only

  
07/12/22  
Mr. N. V. Nakharekar

Hostel Rector, IIP Hostel

  
Smt. S. S. Sakpal

Approved for payment of Honorarium.

  
07/12/22  
Dr. A. B. Khade  
Principal

**FORM NO. 16A**

[See rule 31(1)(b)]

Certificate under section 203 of the Income-tax Act, 1961 for tax deducted at source

Certificate No. LLMLELA	Last updated on 15-May-2022
Name and address of the deductor	Name and address of the deductee
INDIRA INSTITUTE OF PHARMACY 0, SADAVALI, TAL - SANGMESHVAR, RATNAGIRI - 415804 Maharashtra +(91)2354-241799 info@iip.ind.in	PRAJAKTA VISHAL KULKARNI G 18, RUBY APARTMENT, OPPOSITE SASANE GROUND, TARABAI PARK, KOLHAPUR - 416003 Maharashtra

PAN of the deductor	TAN of the deductor	PAN of the deductee
PANNOTREQD	KLPI00625C	BSXPP6680H

CIT (TDS)	Assessment Year	Period	
The Commissioner of Income Tax (TDS) 4th Floor, .A. Wing, PMT Commercial Complex, Shankar Sheth Road , Swargate, Pune - 411037	2022-23	From 01-Jan-2022	To 31-Mar-2022

## Summary of payment

Sl. No.	Amount paid/ credited	Nature of payment**	Deductee Reference No. provided by the Deductor (if any)	Date of payment/ credit (dd/mm/yyyy)
1	7000.00	194JB		13-01-2022
2	7000.00	194JB		10-03-2022
<b>Total (Rs.)</b>	<b>14000.00</b>			

## Summary of tax deducted at source in respect of Deductee

Quarter	Receipt Numbers of Original Quarterly Statements of TDS Under sub-section (3) of Section 200	Amount of Tax Deducted in respect of Deductee	Amount of Tax Deposited / Remitted in respect of Deductee
Q4	QUWXXNGB	1400.00	1400.00

**I. DETAILS OF TAX DEDUCTED AND DEPOSITED IN THE CENTRAL GOVERNMENT ACCOUNT THROUGH BOOK ADJUSTMENT**  
 (The deductor to provide payment-wise details of tax deducted and deposited with respect to the deductee)

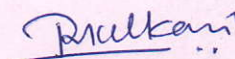
Sl. No.	Tax deposited in respect of deductee (Rs.)	Book Identification Number (BIN)			
		Receipt Numbers of Form No. 24G	DDO serial number in Form No. 24G	Date of Transfer voucher (dd/mm/yyyy)	Status of Matching with Form No. 24G
<b>Total (Rs.)</b>					

**II. DETAILS OF TAX DEDUCTED AND DEPOSITED IN THE CENTRAL GOVERNMENT ACCOUNT THROUGH CHALLAN**  
 (The deductor to provide payment-wise details of tax deducted and deposited with respect to the deductee)

Sl. No.	Tax deposited in respect of the deductee (Rs.)	Challan Identification Number (CIN)			
		BSR Code of the Bank Branch	Date on which tax deposited (dd/mm/yyyy)	Challan Serial Number	Status of matching with OLTAS*
1	700.00	0011349	13-01-2022	02159	F
2	700.00	0013283	21-03-2022	01871	F
<b>Total (Rs.)</b>	<b>1400.00</b>				

## Verification

I, AMOL BABAN KHADE, son / daughter of BABAN SONYBAPU KHADE working in the capacity of PRINCIPAL (designation) do hereby certify that a sum of Rs. 1400.00 [Rs. One Thousand Four Hundred Only (in words)] has been deducted and a sum of Rs. 1400.00 [Rs. One Thousand Four Hundred Only] has been deposited to the credit of the Central Government. I further certify that the information given above is true, complete and correct and is based on the books of account, documents, TDS statements, TDS deposited and other available records.



Place	RATNAGIRI	 (Signature of person responsible for deduction of tax) Principal
Date	17-May-2022	
Designation: PRINCIPAL		Full Name: AMOL BABAN CHAVAN Sadavali (Devrukh)

**Notes:**

- Form 16A contains the latest transaction reported by the deductor in the TDS / TCS Statement. For further details please view your 26AS for same AY on the website <https://www.tdscpc.gov.in>
- To update the PAN details in Income Tax Department database, apply for 'PAN change request' through NSDL or UTITSL
- In items I and II, in column for tax deposited in respect of deductee, furnish total amount of TDS, surcharge (if applicable) and education cess (if applicable).

**Legend used in Form 16A**

**\* Status of matching with OLTAS**

Legend	Description	Definition
U	Unmatched	Deductors have not deposited taxes or have furnished incorrect particulars of tax payment. Final credit will be reflected only when payment details in bank match with details of deposit in TDS / TCS statement
P	Provisional	Provisional tax credit is effected only for TDS / TCS Statements filed by Government deductors. "P" status will be changed to Final (F) on verification of payment details submitted by Pay and Accounts Officer (PAO)
F	Final	In case of non-government deductors, payment details of TDS / TCS deposited in bank by deductor have matched with the payment details mentioned in the TDS / TCS statement filed by the deductors. In case of government deductors, details of TDS / TCS booked in Government account have been verified by Pay & Accounts Officer (PAO)
O	Overbooked	Payment details of TDS / TCS deposited in bank by deductor have matched with details mentioned in the TDS / TCS statement but the amount is over claimed in the statement. Final (F) credit will be reflected only when deductor reduces claimed amount in the statement or makes new payment for excess amount claimed in the statement

**\*\* Nature of Payment**

Section Code	Description
193	Interest on Securities
194	Dividends
194A	Interest other than 'Interest on securities'
194B	Winning from lottery or crossword puzzle
194BB	Winning from horse race
194C	Payments to contractors and sub-contractors
194D	Insurance commission
194E	Payments to non-resident sportsmen or sports associations
194EE	Payments in respect of deposits under National Savings Scheme
194F	Payments on account of repurchase of units by Mutual Fund or Unit Trust of India
194G	Commission, price, etc. on sale of lottery tickets
194H	Commission or brokerage
194I	Rent
194I(a)	Payment of Rent for the use of any machinery or plant or equipment
194I(b)	Payment of Rent for the use of land or building or land appurtenant or furniture or fittings
194J(a)	Fees for technical services
194J(b)	Fees for professional services or royalty etc
194K	Income payable to a resident assessee in respect of units of a specified mutual fund or of the units of the Unit Trust of India
194LA	Payment of compensation on acquisition of certain immovable property
194LB	Income by way of Interest from Infrastructure Debt fund
194LC	Income by way of interest from specified company payable to a non-resident
194LBA	Certain income from units of a business trust
194LBB	Income in respect of units of investment fund
194LBC	Income in respect of investment in securitization trust
194N	Payments of certain amounts in cash
194NF	Payments of certain amounts in cash to non-filers
194O	Payment of certain sums by e-commerce operator to e-commerce participant
194P	Deduction of tax in case of specified senior citizen
194Q	Deduction of tax at source on payment of certain sum for purchase of goods

Section Code	Description
195	Other sums payable to a non-resident
196A	Income in respect of units of non-residents
196B	Payments in respect of units to an offshore fund
196C	Income from foreign currency bonds or shares of Indian company payable to non-residents
196D	Income of foreign institutional investors from securities
196DA	Income of specified fund from securities
206CA	Collection at source from alcoholic liquor for human consumption
206CB	Collection at source from timber obtained under forest lease
206CC	Collection at source from timber obtained by any mode other than a forest lease
206CD	Collection at source from any other forest produce (not being tendu leaves)
206CE	Collection at source from any scrap
206CF	Collection at source from contractors or licensee or lease relating to parking lots
206CG	Collection at source from contractors or licensee or lease relating to toll plaza
206CH	Collection at source from contractors or licensee or lease relating to mine or quarry
206CI	Collection at source from tendu Leaves
206CJ	Collection at source from on sale of certain Minerals
206CK	Collection at source on cash case of Bullion and Jewellery
206CL	Collection at source on sale of Motor vehicle
206CM	Collection at source on sale in cash of any goods (other than bullion/jewelry)
206CN	Collection at source on providing of any services (other than Ch-XVII-B)





P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir, ✓  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mr. P. P. Mane

Designation : Asst. Prof.

Reason : Personal

No. of Days Required : 03 On / From 13/03/18 To 15/03/18

Alternative Arrangements made:

1) Mr. A. M. Kamarkaje Sign : [Signature]

2) Mr. S. D. Walsangikar Sign : [Signature]

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)	4 1/2	3	1 1/2	<u>[Signature]</u>

Address & Contact Nos. while on leave : Devrukh 7589200533

Thanking You

Your's faithfully

Date : 16/03/18

(Mr. P. P. Mane)

May be granted CL

Remarks : He / She has got 03 days of Casual Leave

[Signature]  
Principal  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir, ✓

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 16/03/18 for 03 days on / from 13/03/18 to 15/03/18 I have joined my duties today the 16/03/18

Your's faithfully

[Signature]  
Principal  
Indira Institute of Pharmacy

(Mr. P. P. Mane)

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir,  
I am applying for ~~Casual~~ / ~~Special Casual\*~~ /  **Duty leave\*\*** giving the following particulars :

Name of the Applicant : Mr. A. B. Khade  
Designation : Asst. Professor  
Reason : To attend sem-IV med-chem-I exam at PESCO, Goa.  
No. of Days Required : 01 On / From 12/12/2017 To -

Alternative Arrangements made:

1) Mr. N.V. Thorat Sign :

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)		<u>To attend sem-IV med-chem-I</u>		
	<u>exam at</u>	<u>PESCO</u>		

Address & Contact Nos. while on leave : PESCO, Goa.

Thanking You

Date : 09/12/2017

May be granted D.L

Remarks : He / She has got 01 days of D.L Leave

Your's faithfully

Principal  
Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 09/12/17 for 01 days on / from 12/12/17 to - I have joined my duties today the 13/12/17

Your's faithfully

Principal  
Indira Institute of Pharmacy

(.....)

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)



Amol Khade <abkhade@gmail.com>

# Appointment as an External Examiner in the subject of Medicinal Chemistry-I of Semester-V.

2 messages

**Ajit.Madhukar. Godbole** <amgodbole2004@gmail.com>

Wed, Dec 6, 2017 at 2:13 PM

To: Amol Khade <abkhade@gmail.com>

Dear Sir( Dr Amol Khade),

I am directed to inform you that you have been appointed as an **External Examiner in the subject of Medicinal Chemistry-I of Semester-V at PES'S Rajaram and Tarabai Bandekar College of Pharmacy, Farmagudi Ponda, Goa on 11th and 12th of December 2017.**  
**The University seeks your cooperation in smooth conduct of practical examinations.**

This is for your kind information,  
With warm regards,  
**Prof. Ajeet M. Godbole,**  
Chairman, Board of Studies in Pharmacy(UG).  
Goa University,  
Goa.

**Amol Khade** <abkhade@gmail.com>

Wed, Dec 6, 2017 at 4:03 PM

To: "Ajit.Madhukar. Godbole" <amgodbole2004@gmail.com>

Dear sir  
Thank you very much for u r mail.  
Regards  
[Quoted text hidden]

*Handwritten signature*  
12/12

### JOINING REPORT

With reference to my Casual / Special Casual / Duty leave application dated 09/12/17, I have joined my duties today the 12/12/17.

Principal  
Indira Institute of Pharmacy

*Handwritten signature*

Note: \* and \*\* : Enclose the supporting documents (Appointments Order of Exam., Inspection / conference Regs. Letters etc.)



LEAVE APPLICATION

(Note: Duly filled in form to be presented to Principal for previous sanction)

To, The Principal, Indira Institute of Pharmacy, Sadavali (Devrukh).

Mrs. Eshwarya Vaibhav Jadhav Clerk, Indira Institute of Pharmacy, Sadavali Date: 05/06/2017

Sir, I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mrs. E.V. Jadhav

Designation : Clerk

Reason : Maternity leave

No. of Days Required : 6 Months On / From 01/07/2017 To 31/12/2017

Alternative Arrangements made:

- 1) Sign:
2) Sign:
3) Sign:

Table with 4 columns: Nature of Leave, Previous Balance, No. of Days Required at present, Balance after utilizing Present Leave. Row 1: Casual Leave (Maximum 12 Days in a Year), 6 months Maternity leave, Srijadhav.

Address & Contact Nos. while on leave :

Thanking You

Your's faithfully

Date : 29/06/2017

Srijadhav

May be granted 6 months maternity leave

Remarks : He / She has got 6 Months days of Maternity Leave

Principal Indira Institute of Pharmacy, Sadavali

JOINING REPORT

Sir, With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 29/6/17 for 6 months days on / from 01/07/2017 to 31/12/2017 I have joined my duties today the 01/01/2018

Your's faithfully

Principal Indira Institute of Pharmacy 02/01/18

Srijadhav

Mrs. Eshwarya Vaibhav Jadhav  
Clerk,  
Indira Institute of Pharmacy,  
Sadavali  
Date: 05/06/2017

To,  
Principal  
Indira Institute of Pharmacy, Sadavali

Sub: About Maternity Leave .....

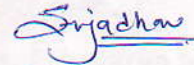
Respected Sir,

I am Mrs. Eshwarya Vaibhav Jadhav working as Clerk in your institute since 20 June 2016. As per cited in above, I expecting my delivery on last week of July 2017, so herewith I am applying for maternity leave from 1<sup>st</sup> July 2017 to 31<sup>st</sup> December 2017.

So please kindly consider the application and do the needful

Thanking you.

Yours faithfully,



(Mrs. Eshwarya V. Jadhav)

Mr. Shopnikar,

To be considered as per the procedure

  
05/06/17

INDIRA INSTITUTE OF PHARMACY  
LEAVE APPLICATION

Mrs. Eshwarya Vaibhav Jadhav  
Clerk,  
Indira Institute of Pharmacy,  
Sadavali  
Date: 01/01/2018

To,  
Principal  
Indira Institute of Pharmacy, Sadavali

Sub: Joining Report .....  
Ref: My letter dt.05/06/2017 (For Maternity Leave)

Respected Sir,

I am Mrs. Eshwarya Vaibhav Jadhav working as Clerk in this institute since 20 June 2016. As per subject cited above, I am joining my duties today on 01/01/2018.

So please kindly consider the application and do the needful

Thanking you.

Yours faithfully,



(Mrs. Eshwarya V. Jadhav)

To be considered for joining  
as per procedure  
R  
01/01/18



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY, SADAVALI.**  
**LEAVE APPLICATION**

(Note: Duly filled in form to be presented to Principal for previous sanction)

To,  
The Principal,  
Indira Institute of Pharmacy,  
Sadavali (Devrukh).

Sir, ML  
I am applying for Casual / Special Casual\* / Duty leave\*\* giving the following particulars :

Name of the Applicant : Mrs. Dhruuti P. Mane

Designation : Asst. Prof.

Reason : Personal

No. of Days Required : 05 On / From 2/03/18 To 06/03/18

Alternative Arrangements made:

1) ..... Sign : .....

2) ..... Sign : .....

Nature of Leave	Previous Balance	No. of Days Required at present	Balance after utilizing Present Leave	Signature of the Office Staff
Casual Leave (Maximum 12 Days in a Year)				
<u>Medical leave</u>	<u>- 05 days</u>	<u>medical leave</u>	<u>—————</u>	<u>Srijadhav</u>

Address & Contact Nos. while on leave : Devrukh 7038288289

Thanking You

Your's faithfully

02/03/18

(Mrs. D. P. Mane)

May be granted Medical leave

Remarks : He / She has got 05 days of Medical Leave

P  
Principal

Indira Institute of Pharmacy, Sadavali

**JOINING REPORT**

Sir,

M.L.

With reference to my Casual / Special Casual\* / Duty leave \*\* application dated 02/03/18 for 05 days on / from 02/03/18 to 06/03/18 I have joined my duties today the 07/03/18

Your's faithfully

P  
Principal

Indira Institute of Pharmacy

(Mrs. D. P. Mane)

Note : \* and \*\* : Enclose the supporting documents ( Appointment Order of Exam., Inspection / conference Regn. Letter etc.)

# श्री NURSING HOME

Hospital Reg. No. 05/2016

Dr. Mrs. Smita S. Chodankar

M. S. Obs. & Gyn [Ayu]

Reg.No. I - 39199 A - 1

Patients Name Dhruvi Prashant Mane

Patients Address At. Post. Sadawali


12/4/2018

To Whom do ever conceive

This to certify that Mrs Dhruvi Prashant Mane of age 30 yrs old A/P Sadawali was my pt. She was pregnant in normal manner.

In view of normal pregnancy. I suggested her. Caesarean section was done from 1/3/2018

to 6/3/2018

  
Dr. Mrs. Smita S. Chodankar  
M. S. obs & Gyn. (Ayu.)  
Regi. - 139199 - A - 1

रुग्ण आपल्या इच्छेनुसार जेनरिक औषधे घेवू शकतात.

A/P- Sadawali (Gadre compound), Tal Sangameshwar, Dist. Ratnagiri. (02354)261096, 261097

पुढील तपासणीसाठी येताना हा पेपर सोबत आणावा.



155



P. S. P. S's  
**INDIRA INSTITUTE OF PHARMACY**  
At & Po. Sadavali (Devrukhi), Tal. Sangameshwar, Dist. Ratnagiri ☎ (02354) 241799

**DEBIT VOUCHER**

Vr. No. :

A/c. of Uniform

Date: 13/11/12

To, Suresh cloth Centre

Being	Rs.	Ps.
Purchase cloth for security staff uniform	815/-	
<b>SANCTIONED FOR PAYMENT</b>		
(Bill No. 131)	CH./D.D. No. 026706	
	Dated: 13/07/12	
	TOTAL	815/-

in words Rs. Eight hundred fifteen only

For SURESH CLOTH CENTRE

[Signature]  
Prepared By

[Signature]  
Accountant

[Signature]  
Approved By

[Signature]  
STAMP  
Proprietor  
Receiver's Signature

VAT TIN 27710217565 V ॥ ॐ श्री जगदम्बे नमः ॥

# सुरेश क्लॉथ सेंटर

एस्. टी. स्टैंड समोर, देवरुख, जि. रत्नागिरी, मोबाईल ९४२२४३२२९२

CREDIT MEMO नंबर : **131** दिनांक : 28/6/17.

रा. Indira Institute of Pharmacy  
रा. Sadawali

नंबर	तपशील	नग	दर	किंमत रुपये	पैसे
	शुटींग	2.5	200	500	
	शर्टिंग	4.5	70	315	
				<u>815</u>	
	Security person dress				
	Amalind 06.07.17				
			एकूण		

माल घेणाऱ्याची सही

माल देणार सही

79



**P. S. P. S's  
INDIRA INSTITUTE OF PHARMACY**

At & Po. Sadavali (Devrukh), Tal. Sangameshwar, Dist. Ratnagiri ☎ (02354) 241799

**DEBIT VOUCHER**

Vr. No. :

Date: 19/12/2017

Ac. of Uniform

To, Vijaykumar Madhaban Bills

	Rs.	Ps.
Being <u>Outdated cheque No. 047824 - 19/12/2017.</u>	<u>1060/-</u>	
<u>Ch No.</u>		
<b>TOTAL</b>	<u>1060/-</u>	

In words Rs. One thousand Sixty only

Prepared By

Accountant

Approved By

Receiver's Signature

STAMP