

ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्यएवंपरिवारकत्थाणमंत्रालय , भारतसरकारकेअधीनराष्ट्रीयमहत्वकासंस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare)

भारतसरकार/ Government of India

PUBLICATION FINANCIAL MANAGEMENT SYSTEM FORM

Name	
Feb. 6.	:-
Father/Husband Name	3-
DOB	•
Aadhar No	:-
PAN	:-
Address 1	:-
	-
Address 2	:-
Address 3	-
City	-
District	:-
State	:-
	:-
Country	•
Pin Code	•
Mobile No	:-
Landline No	;-
	:-
Email Address	:-
Bank Name	-
Account No	•
IFSC Code	;-
TO COUE	;-

Signature-Name-Designation-Department-Empl. Code-

Note:- Details are required to be filled up and submitted to Administration Section On urgent basis for Implementation of Public Financial Management System.

Enclosure to be submitted:-

- 1. Copy of PAN Card
- 2. Copy of Aadhar Card
- 3. A Cancelled Cheque of Bank A/c.