F.No. Z. 18017/188/CSS/SHG/UP - 01/2014-15 - NMPB/1417

National Medicinal Plants Board

Department of Ayurveda, Yoga & Naturopathy, Unani, Siddha & Homoeopathy(AYUSH) Ministry of Health & Family Welfare

Government of India

Room No. 309, 3rd Floor, AYUSH Bhawan B - Block, GPO Complex, INA

New Delhi - 110023

Phone No. 011-24651824 - 28 E-mail: info-nmpb@nic.in

Dated the 20th September, 2014

Dr. Ravi Kurudu Co O'di wal

Dr. Amar Singh Kashyap, Principal Investigator(PI), Deptt. of Botany, MM College, Modinagar- UP

Subject: Approval of the Project Proposal - Regarding your submitted

Sir.

The undersigned is directed to refer to the project proposal on "Sustainable development and conservation program for rare and common medicinal plants garden local communities and-institutions (western-UP)" and to say that the project has been approved in 61st SFC meeting held on 16/09/2014 for a total cost of Rs. 2.80 lakhs (Rupees Two lakhs eighty thousand only) for a period of 2 years. The project no. of the project is SHG/UP - 01/2014-15. A detail of the approved financial break-up is as indicated below:

S.	Componenet.	Physical	Evaluated cost as per	Budget approved during
No.		No.	norms (in Rs.)	61st SFC (in Rs.)
1.	Establishment of School	20	20 x Rs. 14,000/-	2,80,000/
	Herbal Garden @ Rs. 14,000/-			
	and the second of the second o	Alexander Co	TOTAL	2,80,000/-
			1 st installment	2,00,000/-
			2 nd installment	80,000/-

You are requested to submit the duly filled up proforma of Agency Details (enclosed) for transferring the grant-in-aid through ECS/RTGS mode & for online monitoring of the project along with the documents under mentioned:

- 1. Pre-receipt of 1st Installment as indicated in the enclosure for Rs. 2.00 lakhs for the year 2014-15 on affixed Re. 1/- revenue stamp.
- 2. A certificate stating that Institute/organization is not involved in any proceeding relating to the account of conduct for any of its office bearers.
- 3. An undertaking that the terms and conditions of the grant are acceptable to the college/organizations.
- 4. A certified copy duly authenticated by a Gazetted Officer of the documents showing the Constitution of the governing Body or Managing Committee responsible for the running of the organization and that the persons signing the bond are authorized to operate upon and bind the funds of organizations/Institute.

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A certificate that the organization has not received any grant from State or Central Govt. or from any other agency for the same proposal.

6. A bond on Rs. 100/- stamp paper duly executed & signed in the prescribed proforma

(enclosed)

In order to facilitate the release of grant, the following information is required by the Chief Controller of Accounts of the Ministry of Health & Family Welfare

- a) Whether permission of State Government for implementation of the project has been
- b) The account to which the funds are to be transferred and whether the permission of the state Govt. exists for this. The official who operate the accounts

c) Whether the account is saving/current account.

d) What is the institution mechanism to monitor the project?

- e) The authority authorized to audit the project accounts whether through the CAG or the Chartered Accountant:
- f) The authority to submit audited Utilization Certificate

You are requested to furnish the above information/ documents at the earliest.

Please quote the project No. for any correspondence with the Board.

Yours Faithfully

Copy to-

1. Sakham samaj samiti KI-108, Kavinagar, Ghaziabad-201002

(Dr. KavitaTyagi) Consultant (Agro.)

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