## STANDARD FORM OF SOP



SF 8.10A: Audit Certificate for the Month of \_\_\_\_\_ (1st Month), 20\_\_\_

## Date:

This has	reference	e to the	DDU-GK	Y project	sanct	tioned	vide sa	nction	order no	,
dated		project	code	b	eing	implen	nented	in the	state	by
M/s			(nam	e of PIA) (	hereiı	n after o	called a	s PIA) h	aving its regist	tered
office	at			(Address	s).	Based	on	the	verification	of
accounts	/records/	documer	nts as furi	nished and	d expl	anation	given b	y PIA, t	his is to certify	that

Sl.	Particulars	Remarks		
No.				
1.	PIA has not booked any expenditure other than allowable expenditures as per SOP, Sanction Order and MoU	Yes/No		
2.	Balance as per cash and pass book are fully reconciled	Yes/No		
3.	PFMS is reconciled with cash book	Yes/No		
4.	Food and To & Fro Expenses has been paid to non - residential Yes/No candidates as per the terms of SOP			
5.	Post placement support has been paid to the placed candidates as per the terms of SOP	Yes/No		
6.	Expenditure booked towards one time travel facilities provided to the candidates are as per the terms of SOP	Yes/No		
7.	Expenditure booked towards boarding & lodging facilities provided to the candidates are as per the terms of SOP	Yes/No		
8.	Expenditure booked towards uniform procured for distribution to the candidates are as per the terms of SOP	Yes/No		
9.	Salary payment to trainers/master trainers, Q team members as per the terms of their contract with PIA	Yes/No		
10.	All transactions with respect to the heads of expenditures other than Sl. 3, 4, 5, 6 and 7 above have been verified as per audit standards of ICAI	Yes/No		
11.	Fixed assets created out of the funds released to the project has been purchased, depreciated and disposed as per section 8.7 of SOP	Yes/No		
12.	All the supporting documents against the transactions verified were found authentic	Yes/No		
13.	Monthly Financial Verification Certificate has been considered and reviewed during Audit of books of account	Yes/No		

## STANDARD FORM OF SOP



## Audit remarks1:

Firm name......
Seal of the firm.....

Sl. No. of Certificate	Audit remarks					
Signature of auditor	······································					
Full name of auditor						
Membership number						

<sup>&</sup>lt;sup>1</sup>Audit remarks need to specifically elaborate the reasons along-with documentary evidence if the Auditor records 'No' in respect of any of the 13 parameters noted above.