FORM 5

[See rule 13(1)(b)]

Name of Scheme/Source of fund	
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Opening Balance	Ref. No. (G.O./Sanction No. etc.)	Received Amount	Total Amount Rs. P.	Total Expenditure for the month	Closing Balance Rs. P.
Rs. P.	s. P.	Rs. P.		Rs. P.	

Dated : Signature of Member-Secretary or duly authorized officer of the East Kolkata Wetlands Management Authority

Note: One Scheme should be entered in one page