

අධ්‍යක්ෂ ජනරාල්
பணிப்பாளர் நாயகம் } 484728
Director General

අතිරේක අධ්‍යක්ෂ ජනරාල්
மேலதிக பணிப்பாளர் நாயகம் } 484729
Addl. Director General

පොදු
பொது } 484731
General

ෆැක්ස්
பெக்ஸ் } (941) 473856
Fax } (941) 320042



රාජ්‍ය ගිණුම් දෙපාර්තමේන්තුව
මහ භාණ්ඩාගාරය
அரசு கணக்குகள் திணைக்களம்
பொதுத் திறைசேரி
Department of State Accounts
General Treasury

මගේ අංකය
எனது இல. } SANTM/4/9/2
My No. }
ඔබේ අංකය
உமது இல. }
Your No. }
දිනය
திகதி } 2003.12.17
Date }
පළමුවන මහල, නැ. සෙ. අංකය 1559,
මහලේකම් කාර්යාලය, කොළඹ 01.
முதலாம் மாடி, செயலகம்,
த. பெ. இல. 1559, கொழும்பு 01.
1st Floor, The Secretariat,
P. O. Box 1559, Colombo 01.

State Accounts Circular Letter No. 168/2003

For the kind attention of the Chief Accountant

**Determination of Annual Imprest Limits and submission of
Annual Cash Flow Statement for the year 2004**

01. I hereby inform you to prepare and submit the application for Imprest Limit and the statement of Annual Cash Flow, on the basis of the estimate submitted to the Parliament for the year 2004.
02. Annual Imprest Limit for Ministries / Departments for the year 2004 is being worked out and the following deductions would be made in fixing the imprest limit for Recurrent Expenditure (for Personal Emoluments).
1. 6% on total provision of Salaries & Wages, for W & O. P. recoveries; and
 11. Minimum Credit Limit fixed for the Public Officers Advance Account.
 111. Interest to be charged on Public Officers Advances.
- The following information is also required in fixing the total imprest limit, by the Departments.
- (a) Monthly revenue expected to be collected during the year. (Please state the actual revenue collected up to 31st October 2003.)
 - (b) If your institution is giving sub-allocations to other Ministries / Departments out of the financial provisions available to you to effect payments on your behalf, details on such allocations including the amount and the name of the institution to which such allocation is given.
 - (c) If there will be any payment to be effected by making cross entries in addition to above 2(I), 2(11) & 2(111), a description on such entries to be effected during the year.
 - (d) Monthly Cash requirements for making payments on account of the balance available in the General Deposit Account in view of funds received from third parties in 2003 or before; if any. Please see Note (h).
 - (e) If any Ministry has made arrangement to make fund releases to any Statutory Boards coming under its purview by making use of the imprest obtained from the Treasury to the Ministry concerned, a description for such releases, giving monthly requirements.

In addition to the above, you are kindly requested to complete and submit the statements in the format I & 11 annexed to this letter on or before 10.01.2004.

Lalith R. de Silva
Addl. Director General
for Director General of State Accounts

Notes:

- (a) Details should be provided in respect of allocations made to Ministries / Departments and District Secretariats. Form 2(A) should be used to provide details in this regard.
- (b) Breakdown of Cross Entries under recurrent expenditure should be shown as follows:

W. & O.P.	xxx
P.00 Adv. A/C. Cr. Limit	xxx
Others (including interest on P.O.O. Ad.)	xxx

Total	===

- (c) Provision for contributions to corporations appearing under Head of Expenditure should not be included under programme services.
- (d) Provision in respect of F.A. (Loan), F.A. (Grant) and Counterpart Fund should be excluded when inserting figures under programme Services.
- (e) Amount expected as revenue should be mentioned under Group 02 as indicated at (e) and **not under Group 01.**
- (f) The total imprest required from the Treasury under D.F. and R.F.A. (Loan/Grant) should be separately shown as follows

D.F.	xxx
R.F.A. (Loan/Grant)	xxx

- (g) Amount to be included in Column 8 under "Other Advance Accounts" should be on the following basis.

Total Credit Limit	xxx
Less - Receipts to be brought to A/C. by Cross Entry	xxx
Estimated Cash Receipts	xxx

- (h) Please state only the amount transferred to Deposit A/C of year 2003 allocation with the approval of Director General of State Accounts.

APPLICATION FOR ANNUAL IMPREST LIMITS FOR THE YEAR 2004

A CLASS DEPARTMENTS

FORM 1
(FIGURES IN RS '000)

MINISTRY / DEPT:

UP	DESCRIPTION OF BUDGETARY PROVISION	TOTAL PROVISION (1)	X-ENTRY (2)	DEDUCTIONS		TOTAL DEDUCTIONS (5)=2+3+4	ALLOCATION FROM OTHER DEPTS (6)	IMPREST LIMIT (7)=1-5+6	REV/CASH COLLECTION (8)	AMT READ FROM TREASURY (9)=7-8
				ALLO TO OTHER DEPTS(a) (3)	ALLO TO D/Sec (a) (4)					
	PROG:SERVICES (RECURRENT EXP.) (c), (d)									
	PROG. SALARIES	XX	XX	XX	XX	XX		XX	--	XX
	OTHERS	XX	XX	XX	XX	XX		XX	--	XX
	1	XX	XX	XX	XX	XX		XX	--	XX
	2	XX	XX	XX	XX	XX		XX	--	XX
	3	XX	XX	XX	XX	XX		XX	--	XX
	SUB TOTAL:	XXX	XXX (b)	XXX	XXX	XXX	XXX	XXX	--	XXX
(2)	PROG:SERVICES (CAPITAL EXP.) (c), (d)									
	PROG. DOMESTIC									
	1	XX	XX	XX	XX	XX		XX	XX	XX
	2	XX	XX	XX	XX	XX		XX	XX	XX
	3	XX	XX	XX	XX	XX		XX	XX	XX
	SUB TOTAL:	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX(e)	XXX (f)
(3)	DEPOSIT A/C (h)	XXX	--	--	--	--	--	XXX	--	XXX
(4)	ADV. TO P.OO A/C NO. (D.LIMIT)	XXX	--	--	--	--	--	XXX	--	XXX
(5)	OTHER ADVANCE ACCOUNTS									
	1	XX	XX	XX	XX	XX		XX	XX	XX
	2	XX	XX	XX	XX	XX		XX	XX	XX
	3	XX	XX	XX	XX	XX		XX	XX	XX
	SUB TOTAL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX (g)	XXX
	GRAND TOTAL	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX

... PLEASE READ NOTES ...

Certified as Correct

Monthly Cash Flow Statement as per Approved plans for the Year 2004

Expenditure Head No :

Ministry / Department :

Expenditure Items with Expenditure Codes	Cash Requirements for the approved expenditure plans												Total	
	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.		
I Salaries & Wages with other allowances (1001 and 1003)														
II Over time & Holiday Pay (1002)														
III All the Other Recurrent Expenditure														
Recurrent Total														
IV Reimbursable Foreign Aids														
V All the other Capital Expenditure														
VI Public Officers Advance Account														
VII Deposit A/C														
VIII Others														
Total														

Rs. ('000)

I certify that the above information is true and correct.

Chief Accountant

Date :-

Secretary to the Ministry / Head of the Department