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**G.27017/08/2024-25/NHM-Finance (E-8272607)**

GOVERNMENT OF INDIA

**MINISTRY OF HEALTH & FAMILY WELFARE****(NHM Finance Division)****Nirman Bhawan, New Delhi.****Dated: 24<sup>th</sup> May, 2024**

To

The Principal Accounts Officer (Compilation Section),  
MoHFW, Nirman Bhawan, New Delhi (with 2 spare copies)

**Subject: Release of 1<sup>st</sup> instalment of Grants-in-aid for Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission.**

Sir,

I am directed to convey the sanction of the President of India to the payment of **Rs.69,44,00,000.00 (Rupees Sixty-Nine Crore and Forty-Four Lakh Only)** to the State/UT of **ARUNACHAL PRADESH** towards grants-in-aid for Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission during the FY **2024-25**.

2. The above amount is in accordance with the instructions issued by the Ministry of Finance (Plan Finance Division) vide their O.M. No.10(1)-PF-I/76 dated 22<sup>nd</sup> January, 1977 and amended time to time.

3. The State/UT shall not make any changes in allocations or re-appropriations among different components/activities without approval of the MoHFW, Gol.

4. The State/UT shall ensure that 40%/10% of its share based on release of funds by GOI is credited to appropriate accounts.

5. The State/UT shall follow all the financial management systems under NHM and shall submit Audit Reports, Utilization Certificates, Quarterly Summary on Concurrent Audit, FMRs/SOEs and Statement of Funds Position, showing unspent balances, funds released as advances, interest earned on unspent balance as and when due. Provisional Utilization Certificate for the FY 2023-24 has been received.

6. Grant in-aid shall be used for the purpose for which sanction is given. An annual utilization certificate (in Form **GFR 12C**) shall be furnished that the contribution has been utilized for the purpose for which it was sanctioned.

7. The sanction order is being issued in accordance with Rules 228 to 245 of General Financial Rules, 2017.

8. The expenditure involved is recurring and will be met from the funds provided under the following heads in Demand No.46 – Health & Family Welfare during **2024-2025**:

| S. No. | Scheme | Budget Head                   | Amount (Rs.) |
|--------|--------|-------------------------------|--------------|
| 1      |        | 3601-06-101-16-06-31<br>(GBS) | 19,51,00,000 |

|       |                                                                                                         |                            |              |
|-------|---------------------------------------------------------------------------------------------------------|----------------------------|--------------|
| 2     | Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission | 3601-06-101-16-06-35 (GBS) | 2,16,00,000  |
| 3     |                                                                                                         | 3601-06-796-86-01-31 (GBS) | 42,99,00,000 |
| 4     |                                                                                                         | 3601-06-796-86-01-35 (GBS) | 4,78,00,000  |
| Total |                                                                                                         |                            | 69,44,00,000 |

9. The grants-in-aid now sanctioned is provisional and is subject to adjustment on the basis of audited figures of expenditure in terms of Ministry of Finance, Department of Expenditure, letter No.2 (90)-P. II/66 dated 09.10.1966.

10. This sanction issues with the concurrence of Integrated Finance Division vide Dy. No. CD No.**C-531** dated **21-05-2024**.

Yours faithfully,

(Malay Kumar Halder)  
Under Secretary to the Government of India

Copy for appropriate action to:

1. Principal Secretary of Department of Health and Family Welfare State/UT of **ARUNACHAL PRADESH**.
2. Principal Secretary of Department of Finance State/UT of **ARUNACHAL PRADESH**.
3. Mission Director (NHM) State/UT of **ARUNACHAL PRADESH**.
4. Accounts Officer Pay and Accounts Office, Nirman Bhawan.
5. Accountant General State/UT of **ARUNACHAL PRADESH**.