

FORM 54  
**TRANSFER ENTRY NUMBER BOOK**  
*(Referred to in paragraph 8.1.10 of the CPWA Code)*

For the month of .....20 .

Date	Item No	* Particulars of each Transaction	Debit		Credit		Dated initials of Divisional Accountant
			Head of Account (with name of work)	Amount	Head of Account (with name of work)	Amount	
1	2	3	4	5	6	7	8
				Rs.		Rs.	
			Total		Total		

\* Authority should be quoted in all cases e.g. No. and date of T.E. order or of Advice and Acceptance of Transfer. In cases falling under Note 1 below paragraph 8.19 of the code it will suffice if Divisional Officer initials the entry in this column.

Dated initials of Divisional Accountant

Dated initials of Divisional Officer