### Assam State Rural Livelihoods Mission Society (ASRLMS) Detalialist of SHG, VO, CLF of CBRM

BMMU/Block Name:

District:

Bank Name:

	Branch Name:		IFS Code:				
	SHG Name	SHG Code	VO Name	CLF Name	SHG SB A/C no.	Remarks	
1					*		
2							
3							
4							
5							
6							
7	7	2			-4	rate at	
8	3						
9	)						
10							
1:	1						
12	2						
13	3					Danarks	
14	4						
15	5						
14	6						

Note: Name of VO/CLF should be left blank for SHGs or VOs/VLF where it is not formed and should be updated as and when formed

## Assam State Rural Livelihoods Mission Society (ASRLMS)

Member Detail of CBRM Committee

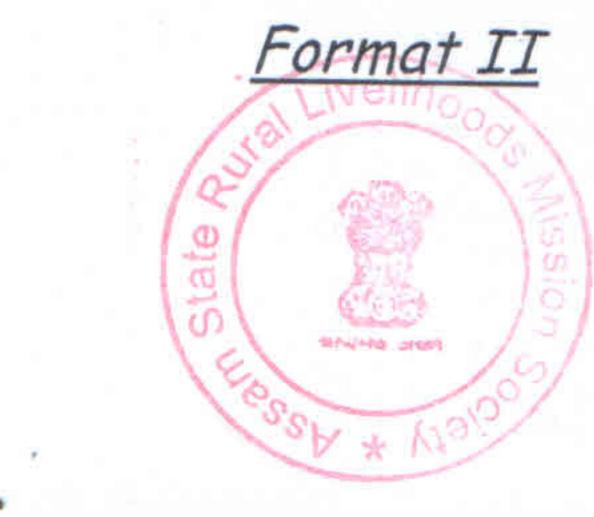
IFS Code:

BMMU/Block Name:

Bank Name:

Branch Name:

District:



51. No.	Members Name	VO Name	CLF Name	Date of Joining	Date of Change	Remarks
1						
2						
3						
4		14.2°				
5						
6						
7					4	
8						Paragi Fr
9						
10						
11						
12						

# Assam State Rural Livelihoods, Mission Society (ASRLMS) Format to Monitor functioning of CBRM

BMMU/Block Name:

District:

Month

Year

Date of Reporting



SI. No.	Name of Branch	Date of BLC Meeting	Nos. of Vos attended	No. of VOs absent			No. of SHGs with overdue loans	
					till last month	lend of	till last	Linked by the end of this month
1								
2								
3		-3						
4								
5								
6								
7								
8								ZARRET E-CVARRET E-CARRET
9								・ X もびむが近に数
10								
11								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Note: 1. Last month refers to the period ending with the previous meeting

- 2. End of this month refers to period from previous meeting to current meeting
- 3. If DLC meeting not held for a particular bank branch, BPM shall mention the reason against the branch name

Format IV

Assam State Rural Livelihoods Mission Society (ASRLMS)

Credit/Loan Register of CBRM

Date of Reporting:

BMMU/Block Name:

Month

District: Year

Bank Name:

Branch Name:

IFS Code:

SI. No.	Particulars	Till Last Month	Current Month Taraet	Achievment in Current Month	Total	Next Month Taraet	Remarks
1	Nos. of SHG Received  Bank Credit						
2	Total Amount of Bank Credit						

Signature Convenor Signature BDO/BPM

Signature

**Branch Manager** 

Format V

### Assam State Rural Livelihoods Mission Society (ASRLMS)

#### Recovery/Repayment Register of CBRM

BMMU/Block Name:

Month Bank Name: District:

Date of Reporting:

Year

Branch Name:

IFS Code:

Sl. No.	Particulars*	Last Month	Current Month	Remarks
1	Nos. of Defaulter SHGs			
	Total Amount of Outstanding (for defaulter SHGs)			
1	Nos. of SHG started repayment(from Defaulter SHG)			
4	Amount Recovered (Defaulter SHG)			
5	Nos. of SHG at PAR			
6	Amount of PAR			
/	Nos. of SHGs not repaid instalment			

Signature Convenor

Signature BDO/BPM

Signature

**Branch Manager** 

<sup>\*</sup> List of all SHGs with Corresponding amount should be prepared seperately