

Assam State Rural Livelihoods Mission Society (ASRLMS)

Detail List of SHG, VO, CLF of CBRM

BMMU/Block Name:

District:

Bank Name:

Branch Name:

IFS Code:



Sl. No.	SHG Name	SHG Code	VO Name	CLF Name	SHG SB A/C no.	Remarks
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

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

Format II



BMMU/Block Name:

District:

Bank Name:

Branch Name:

IFS Code:

Sl. No.	Members Name	VO Name	CLF Name	Date of Joining	Date of Change	Remarks
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

Assam State Rural Livelihoods Mission Society (ASRLMS)

Format to Monitor functioning of CBRM

BMMU/Block Name:

District:

Month

Year

Date of Reporting



Sl. No.	Name of Branch	Date of BLC Meeting	Nos. of Vos attended	No. of VOs absent	No. of SHGs with overdue loans		No. of SHGs with overdue loans	
					till last month	end of this month	to be linked till last month	Linked by the end of this month
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								

- 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

Bank Name:

District:

Year

Branch Name:

IFS Code:



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

Signature
Convenor

Signature
BDO/BPM

Signature
Branch Manager

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			
2	Total Amount of Outstanding (for defaulter SHGs)			
3	Nos. of SHG started repayment(from Defaulter SHG)			
4	Amount Recovered (Defaulter SHG)			
5	Nos. of SHG at PAR			
6	Amount of PAR			
7	Nos. of SHGs not repaid instalment			

Signature
Convenor

Signature
BDO/BPM

Signature
Branch Manager

* List of all SHGs with Corresponding amount should be prepared seperately