



पत्रांक - 198
दिनांक 02/05/25



GOVERNMENT OF JHARKHAND
JHARKHAND STATE MID DAY MEAL AUTHORITY (JSMDMA)
SCHOOL EDUCATION AND LITERACY DEPARTMENT
Room No- 01, Ground Floor, MDI Building, Dhurwa, Ranchi-834004
E-mail: mdmjharkhand@gmail.com

**Notice Inviting "Expression of Interest" From
Chartered Accountant Firms**

Expression of Interest is invited from the C&AG empanelled Jharkhand based Chartered Accountant Firms having 30 (Thirty) years experience with at least 25 audit staff for short listing for engagement in Statutory Audit for the PM Poshan Programme being implemented in the State of Jharkhand by the Jharkhand State Mid Day Meal Authority, Ranchi for FY : 2024-25. The Prescribed format and the Terms of Reference is available in our JSMDMA office and on website <https://schooleducation.jharkhand.gov.in/notice>

Expression of Interest in prescribed format is to be submitted to **Director, Jharkhand state Mid Day Meal Authority (JSMDMA), School Education and Literacy Department, Room No-01, Ground Floor, MDI Building, Dhurwa, Ranchi-834004** through **Registered/Speed Post only up to 31.05.2025 (5:00 pm)**. Expression of Interest received after above mentioned due date and time or incomplete format or with conditional offer will not be entertained / accepted. A selection committee will be constituted to decide selection of eligible firms. Final Selection result will be communicated individually by the authority by email. Undersigned has full right to withdraw or cancel or amend part or whole of the E.O.I or work order accordingly. Any type of disputes arising out of this shall be subject to the jurisdiction of the court of Ranchi under section of I.C.P.C, 1908.


(Shashi Ranjan)
Director, JSMDMA

APPLICATION FORM

**(For short listing Chartered Accountant
Firms for the audit of the accounts of PM POSHAN)**

Status of Firm : Partnership Sole Proprietorship

1. (a) Name of the firm (in Capital letters) -----
(b) Address of the Head Office -----
(Please also give telephone no. and -----
E-mail address) -----
(c) PAN No. of firm -----
(d) C & AG Empanelment No. & Year -----
(e) Service Tax Registration No. -----
(f) GST Registration No. -----
2. ICAI Registration No----- Region Name-----Region Code No-----
3. (a) Date of Constitution of the firm:
(b) Date since when the firms has full time FCA
4. Full time Partners / sole proprietor of the firm as on 01.01.2024

Details of Full time Partners / Sole Proprietor of the firm

S.No	Name of the partner / sole properties	Membership No	Whether FCA /ACA	Date of Joining the firm (full name)	Date of becoming FCA	Station Region & where residing at present	Whether acknowledge ment of Income Tax Return for the relevant year attached Yes / No	Whether has ISA (information systems Audit /CISA or any other equivalent qualification)

Sl.	Years of continuous association in the firm	Number of FCA	Number of ACA
A	Less than one year		
B	1 Year or more but less than 5 year		
C	5 Year or more but less than 10 year		
D	10 Year or more but less than 15 year		
E	15 Years or more		

5. Numbers of part Time Partners if any, as on 1.1.2024 -----

Firm's Name -- -----

Details of Part-Time Partners of the firm

S .No	Name of the partner	Membership No	Whether FCA /ACA	Date of becoming FCA	Date of Joining Partnership	No of other firm in which he is partner	Whether practicing in his own name also (Y/N)	Whether Employed elsewhere (Y/N)	Whether has ISA (information systems Audit /CISA or any other equivalent qualification (specify the qualification)

6. Number of Full Time Chartered Accountant Employees -----

as on 01.01.2024

Details of Full time Chartered Accountant Employees

S .No	Name	Membership No	Whether FCA /ACA	Date of Joining the firm as the (full time employee name)	Whether r has ISA (information systems Audit /CISA or any other equivalent qualification) (Specify the Qualification)	Signature of the employee

7. Number of audit staff employee full-time with the firm

Articles/ Audit Clerks	Other Audit Staff (with knowledge of book Keeping and accountancy)	Other Professional Staff (Please specify)

8. Number of Branches -----

Particulars of Branches (including foreign branches, if any)

S .No	Station at which located	Complete address with PIN Code & Telephone No.	Name of the partner in charge of the branch	Date of opening of the branch	Region	Whether included in last year application (Yes/No)

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9. Fee earned by the firm from April 2023 to
March 2024 in respect of

Fee earned by the firm from April 2023 to March 2024 in respect of	PSU / autonomous body	Companies in Private sector	Banks
Statutory / Branch Audit / 6 monthly Audit Review			
Internal / Concurrent Audit			
Total of (i) and (ii) above			

10. Whether the firm is engaged in any internal / concurrent audit or any other services of any Govt. Companies / Corporations etc.

Details of internal audit work / any other accounting work of Public Sector Undertaking in hand with the firm.

S. No	Name of the PSU/Unit	Nature of assignment	Year for which appointed
1	2	3	4

11. Whether the firm is implementing quality control Policies and procedures designed to ensure that all audits are conducted in accordance with statements on Standard Auditing Practices (SAP 17) Yes/No
12. Whether there is any court /arbitration/any other legal case against the firm Yes/No
13. Whether the firm/Sole proprietor has ever been blacklisted Yes/No
14. Details of audit experience of the firm for the last 5 years in the following Performa. (Only assignments which carry a fee of Rs. 25000/- and above should be mentioned)

Name of the area/ sector	Name of the Company / body audited	Year of audit e.g.	Fees Charged for each of the assignments in each year	Nature of audit assignment Viz. Statutory audit / or Branch audit	Nature of special assignment	Name of the full time partner who supervised the audit or signed the financial statements and who is still working in the firm
	(a) Society/PSU/ autonomous body	(a) 2023-24				
	(b) Companies in private sector	(b) 2022-23				
	(c) Banks	(c) 2021-22				
	(d) Social Sector Programmes Projects	(d) 2020-21				
	(e) Externally aided social Sector projects	(e) 2019-20				
	(f) Education projects / Programmes					
	(g) PM POSHAN Programmes					

Place :

Date :

Signature

TERM AND CONDITION

1. The term full time partner /CA employee does not include those persons [Partner/sole] who are :-
 - (i) Partners in other firms
 - (ii) Employed part-time/full- time elsewhere, practicing in their own name or engaged in practice otherwise or engaged in any other activity which would be deemed to be in practice under section 2 (2) of the Chartered Accountants Act, 1949.
 - (iii) Partners who have earned more professional income from other sources than their income from the firm.

Similarly, the full time Sole Proprietor does not include a person who is a partner in other firms or is employed elsewhere or otherwise engaged in any other business/ activity as mentioned above. Accordingly, a person who is a partner/ employee in another firm, should not apply in his capacity as Sole Proprietor.

2. A firm must have Head office or Branch Office in Jharkhand State which is subject to verification by the authorised team of the State. If existence of the office is not found or not found functional, the candidature of the firm may be cancelled. Address proof to be submitted on demand.
3. C & AG empanelment of C.A firm/Sole Proprietor is must (Empanelment Certificate to be submitted on demand)

Note :

- i. The Firms need not attach any supporting documents. In the event of selection JSMDMA may ask for some or all documents for perusal.
- ii. In the Event of any document being found false, legal action will be taken against the firm and ICAI will be apprised for this kind of fraudulent conduct of the firm.
- iii. Extension of work order for FY: 2025-26 and/or 2026-27 can be given only on the basis of satisfactory performance.
Satisfactory performance includes –
 - a) Response to e-mails and phone calls of JSMDMA/DSEs of District.
 - b) Submission of progress reports to JSMDMA/DSEs concerned as and when required.
 - c) Completion of work in given time. Delay will be accepted only under genuine reason apprised by the concerned CA well in time.
 - d) The director JSMDMA will have the right to report to ICAI for non-performer CAs or for any breach of trust with regard to terms and conditions.
 - e) Meeting of JSMDMA or DSEs will be attended by only a person who is well acquainted with all the facts with regard to genuine audit work.
- iv. Payment of fees will be given only after submission of final report (soft copy and hard copy). No request for part or Advance payment will be entertained.

- v. Minimum fee for proposed audit work for a financial year is as followed :-

Level of Audit	Rate in Rs.
All Schools audit in a Panchayat or a Ward Level (including State Plan)	250/-
Audit of Block & Compilation of All School Level Audit (including State Plan)	600/-
Audit of District & Compilation of All Block level Audit (including State Plan)	10,000/-
Audit of State and Compilation of All District level Audit (including State Plan)	30,000/-

- vi. The Expression of Interest must be delivered by Speed post (in a sealed envelope) in the office of the Director, Mid-Day-Meal Authority, Jharkhand. The Expression of Interest must be sent by Registered /speed post addressed to:

**The Director,
Jharkhand State Mid-Day-Meal Authority
MDI Building Ground Floor, Room No. 01, Dhurwa, Ranchi – 834004**

SECTION – B

Undertaking

I/We the sole proprietor / following partners of M/s.-----
Chartered Accountant do hereby verify/ jointly verify and declare-

- (i) That the particulars given are complete and correct and that if any of the statements made or the information so furnished in the application from is later found not correct or false or there has been suppression of material information, the firm would not only stand disqualified from allotment but would be liable for disciplinary action under the Chartered Accountants Act, 1949 and the regulations framed there under;
- (ii) That the firm, proprietor of partners has not been debarred or cautioned by ICAI during the last three years, (if debarred, give details);
- (iii) That individually we are not engaged in practice otherwise or in any other activity which would be deemed to be in practice under Section 2 (2) of the Chartered Accountants Act, 1949;
- (iv) That the constitution of the firm as on 1st January of the relevant year shown in the Expression of Interest is same as that in the constitution certificate issued by the ICAI.

SL. No	Name of the partner / sole proprietor	Membership Registration No.	PAN No.	Dates of payment of the fees for the relevant year----- AB*	Signature of partner / sole proprietor

(Seal of the Firm)

*A For membership

*B For issue of Certificate of practice

Place:

Date:

Enclosures: -----pages

For office use Only

Whether firm has done

- (a) Statutory/Branch Audit
- (b) Internal/Concurrent Audit

Yes/No

Checked by

Verified by

Date updated by

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