PRACTICAL REMUNERATION BILL (External Examiner)

Name o	of Exam Centre	/Laboratory: .										
Designa	ation		F	Rasic Pay 8	Grade Pav	·		Name	of Bank			
IFSC Co	de	Account No					PAN			lo		
Sr. No). Date	Session (M/E)	Sem.	Branch	Subject	Subject Code	Practical	Project report/Viva Voce/Industrial Trg	No. of Allotted	Students Appeared	Rate	Amount
										=		
					Gr	and Total						
					Les	ss TWF @	5%	VAL - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1		(-)	
	Net Amount Payable											
Note:	1. Fill all the co	lumns/fields.	2. Bill must	be accom	npanied wit	h TA Bill & I	Outy Certific	ate. 3. Income tax	will be dedu	cted where ap	plicable.	-
										Signature	of Externa	l Examiner
Bill Ve	erified for Rs							Delegion				
Receiv	ved a sum of R	S		on accou	nt of above	payment.	()	Principal With official Stamp)				
				Signatu	re with Nam	ie/Date						
		. 3	n-1					(Laboratory Sta				
								IFSC Code				
10.00												
Sr. No.	Date	Session (M/E)	Semest	er B	ranch	Subj	ect	Name of Lab.	No. of Students appeare			mount
			-						арреате			
								4				
				Grai	nd Total		<u> </u>					
Note:	No TWF is to	be deducte	ed from La	b. Staff.								
									Signatur	e of Externa	l Examin	er
Bill Ve	erified for Rs.					••						
							Pri	ncipal				
Receiv	ved a sum of	Rs	······	on a	ccount of	above pay		ficial Stamp)				