

EXAMINATIONS OF MARCH-APRIL/OCTOBER-NOVEMBER-201**BILL No.**

- (1) I have submitted the Answer-books to University Receipt No. Dt.
 (2) I have despatched the Answer-books vide Regd. Post No. Dt. OR
 By Railway Receipt No. Dt.

Part-time
External
Internal

Note : (1) All entries in this form must be filled in by person preparing the bill. Forms in which any entry is left blank will be returned for completion to the person preparing the bill.
 (2) All bill shall be received in advance.

ALL EXAMINATIONS PAYMENT BILL MAY PLEASE BE SUBMITTED TO THE ACCOUNT SECTION.

GUJARAT UNIVERSITY..... **EXAMINATION**

N.B.- In case where the some Examiners are appointed to examine at more examinations then one or in more subjects than one, separate bill should be made out in respect of each such examinations or subject.

NAME FATHER'S /HUSBAND'S NAME SURNAME

To (Name of Examiner)

(In BLOCK Letter)

In Subject at the

Examinations of March-April/October-November, 20

Particulars :	Rs.	P.	Total
Drawing up question-paper Full/Half as Rs per paper ... (Remuneration for proof-reading is not be included in the bill. Seperate printed bills may please be filled in and submitted for payment.)	Rs.	P.	
For supply of additional copies at Rs. 2 per copy and Re. 1 per cyclostyled copy			
Examining..... answer-book at Rs.per paper			
Examining Candidates Orally, Practically or Clinically at Rs. per candidate ...			
Examining Candidates for term work at the Rs. per candidate...			
Remuneration for Chairmanship/Covenership if any... ..			
Remuneration for Moderation			
Honorarium for Examining dissertation at Rs. Total Rs.			
Adhoc Postage charge as per scale... .. Total Rs.			
1. Deduct Rs..... at Rs. 15 per day for late submission of marks			
Examination period <u>January to June</u> 20 .. is as under : <u>July to December</u>			
Particulars :	Rs.	P.	Total

E. & O. Excepted.

(1) I hereby declare that I am a resident of situated in the Republic of India in State and that the Income-tax Rules inforce in the Republic of India are applicable to me.

Date : (Signature) :

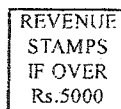
College Address in Short :

Name :
 Address :
 IN
 BLOCK
 LETTERS
 Date :
 M./No./Phone No.

(Signature) :
 Passed for Rs. P.
 Rs.
 (In wards)
 LETTERS
 Date :
 M./No./Phone No.

Payment received

Countersigned by
 Convener Chairman



Auditor

Chief Accounts Officer

Controller of Exams.

*Please mention it clearly if you are appointed at other subject or examination.
 In Complete From will be not be entiled for payment.

Uni. Appointment No. Date :

1. Code No. 3511000

2. Voucher No.

GUJARAT UNIVERSITY**CONVEYANCE ALLOWANCE BILL FOR LOCAL EXAMINER**

Name

Father's Name

Surname

Fathers/Husband Name

Name of the Examiner
(In block letters) }in subject Theory / Practical at the Examination, March/April
October 20 ..

Meeting	Dates of meeting or dates of practicals	Place (write college for pract). Conveyance Allowance @Rs. 75-00 per day for meeting or for the days of Practical	Rs.	P.
for Paper-submitting				
for setting Result / meeting				
Any other Special meeting				
for conducting Practical Examinations				

College Address.....

Date :

Signature of Examiner

Passed for Rs. P.

Rupees

Payment received in cash

Sign. :

Countersignature by the
Principal or H.O.D. with Stemp

of Examinar

S.O. (Audit) C.A.O.....
Gujarat University