REGIONAL INSTITUTE OF EDUCATION: BHUBANESWAR CAMPUS & WELFARE SECTION (FORMAT FOR REIMBURSEMENT OF COST OF NEWS PAPER)

1. Name & Designation

2. Deptt./Section

3. Claim for the period : January to June

G Year-

(Put ≺Mark) : July to December □ Year-

4. Bill Details

SI No.	Month	Amount (RS.)	SLNO.	Month	Amount (RS.)
	January		1	Billy	
2	February		2	August	
3	March		3	September	
4	April		- 4	October	
-5	May		5	November	
6.	June		- 6	December	
	Total			Total	
15% cost of Ruddi (-)		F:	15% cost of Ruddi (-)		
Grand Total			Grand Total		

N.B: Original bills must be certified by the claimant

Signature of the claimant

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(Put Mark) : July to December

Year-

4. Bill Details

Month	Amount (RS.)	SI.No.	Month	Amount [RS]
	Various All David	1	July	
ary		2:	August	TO THE
jary		3	September	
h		4	October	
		5	November	
		6	December	
			Total	
Total		15% cost of Ruddi (+)		
15% cost of Ruddi [-]		Grand Total		
			Ruddi (-) 155	5 November 6 December Total 15% cost of Ruddi (-) Grand Total

N.B: Original bills must be certified by the claimant