

# UNIVERSITY OF KALYANI

## BILL FOR HONORARIUM & TA TO THE EXTERNAL/EXPERT

Name of Claimant (in block letter) -----  
 Designation .....  
 Name of Institution/University .....  
 Address.....  
 .....

Date	Purpose	Amount For Sitting Fees(Rs.) [A]	Amount For TA(Rs.) [B]
<b>TOTAL AMOUNT (Rs.) [A + B] :</b>			

[Rupees ..... only]

Account holder Name (block letter)																				
Bank A/C. No.																				
Bank Name																				
Branch Name																				
Branch Code No.																				
IFSC No.																				
Expert's Mobile No.																				
Expert's E-mail																				

Date .....

Signature of the Claimant (in full).....

\_\_\_\_\_  
 Signature of the HOD/PI/Coordinator/Director/  
 Chairman, DRC

\_\_\_\_\_  
 Signature of the Development Officer/PG  
 Secretary/UG Secretary

**(FOR USE OF FINANCE DEPARTMENT)**

Passed Rs..... (Rupees.....)

Only) for Payment through NEFT as per the above Bank Information

Dealing Assistant

Superintendent

AO/A&AO/FO