

**CENTRE FOR PROFESSIONAL AND ADVANCED STUDIES****UNIVERSITY COLLEGE OF ENGINEERING THODUPUZHA****PROFORMA FOR CLAIMING HONORARIUM / REMUNERATION TO TEACHING FACULTY**Contract/Guest: \_\_\_\_\_ Month: **March** Year: **2025**

Name : (In Block letters)	UMER MURTHALA THANGAL K K
Designation	PROFESSOR
Dept/Subject	Computer Science

**Leaves (From the 21 th of previous month to 20th of Bill month)**

Nature & period of leave /absence should be clearly mentioned	LWA	C.L	M.L	D.L/C.O
Date of Leaves		2025-02-21 - 2025-02-22	2025-03-13 - 2025-03-17	
Previous number of leaves allowed	0	2	0	0
Number of current leave /days	0	4	4	0

**HONORARIUM**

Details of work done	days	Rate Rs.	Actual Rate	Amt. Claimed
Amount of honorarium/remuneration			85000	85000
Increment				
Special Allowances				
Other Allowances if any				
Total			85000	85000
<b>Deductions</b>				
IT @1%,IT @20%			850	850
EPF @ 12% (Maximum Rs:1800/-)			1800	1800
ESI (0.75%*)			0	0
PT				
LWA				
Other Deductions if any				
Total Deductions			2650	2650
<b>Net Amount Claimed</b>			<b>82350</b>	<b>82350</b>

**RECEIPT**

Received from the Principal University College of Engineering, Thodupuzha a sum of Rs..... (Rupees ..... only) being the honorarium/remuneration for the month of ..... 20.....

Pay the amount to SBI A/c. No.	8574648376657485
SBI Branch	FDBL6798488
IFSC Code	OTTAPALAM
PAN	PMHPL18467

Certified that excess amount claimed if any, will be refunded to the College.

Mobile No: 9946701751

Signature:

Muttom

Name:

Date 2025-03-15

Principal

**FOR AUDIT USE ONLY**

Verified and found correct and Passed for payment and paid Rs.....(Rupees .....only )

Date:..... Asst.

Principal

As per the order issued, a certificate of Duty Leave from the competent authority shall be attached.



