



B. M. S. COLLEGE OF ENGINEERING, BENGALURU - 560019
(Autonomous Institute, Affiliated to VTU)

Examination Section --- Remuneration Bill

Odd	Even	Make up	Supple	Semester for the period	Date

Name (in block letters)

Name of the College &
Address for Correspondence

Name of the College
(of claimed)

Pan Number

Email ID

Allahabad Bank S B A/c No:
(for Internal Faculty only)

(External Faculties Only) Bank A/c No.:

Bank & Branch :

IFSC Code:

DETAILS OF REMUNERATION CLAIMED (Please tick / appropriate sub heading & mention Dates for claiming DA / TA)

[illegible]

Received Rupees (in words) ..

Total

R.S.

Certified that amount claimed in this bill has not been drawn / paid in any of the previous bill/s.

Sign. of Claimant >

Sign of Claimant

Verified that the work entrusted to the claimant has been carried out satisfactorily.

Head of Account:

Chq. No.

Date:

for Rs. (Rupees

(Rupees

Seal & Sign. of

Received on : _____

HOD / Unit Co-ordinator / BOE Chair Person

Controller of Examination

Signature: _____

Principal Sign. with Seal