

GUJARAT TECHNOLOGICAL UNIVERSITY

EXAMINATION REMUNERATION BILL B.E /B.PHARM/DIPLOMA _____ EXAMINATION 2008-09

Surname
(In Block Letter)

Name of Examiner

Father's Name

Institute Name: _____

Branch : _____

E-Mail ID : _____

Mobile No: _____

| Particulars | Subject Name with Code | No. Of Quantity | Rate | Total Amount RS. |
|--|------------------------|-----------------|------|------------------|
| 1. Examining Answer books : Total No of Answer books examined | | | | |
| 2. Remuneration for paper Setter | | | | |
| 3. Speed Post / Regd.AD Charge(if applicable attach receipt) | | | | |
| Grand Total | | | | |
| Deductions if Any | | | | |
| Net Amount Payable | | | | |

Name : _____

Address : _____

: _____

Received

CERTIFICATE

I hereby certify that above details are correct and I am a resident of India and that the provision of the Income tax-act 1961 is applicable to me and shall comply with it.

Date : _____ Signature of Examiner _____

CERTIFICATE

This is to certify that Shri/Smt/Kum _____ has examined _____ answer books and above details are found to be correct.

Date : _____

Name & Signature of GTU Coordinator

FOR GTU USE ONLY

Passed for Rs. _____ (in words _____)

Date :

Controller of examination

Account Officer