



NEHRU MEMORIAL COLLEGE

(Autonomous, Accredited with 'A' Grade by NAAC & Affiliated to Bharathidasan University, Tiruchirappalli)

Puthanampatti-621007, Tiruchirappalli- District

CLAIM BILL FOR REMUNERATION

(For Internal Examiner)

Nature of work: **Practical Examinations of April/November 20**___

For the UG/PG /Diploma Programme: _____

Title of the Practical Course: _____ Code: _____

Date(s) of Practical Examination: _____ Total Number of Sessions: _____

NAME OF THE EXAMINER WITH OFFICIAL ADDRESS: _____

Remuneration				
No. of candidates Registered	Total Number of students attended	Rate Per Student Rs.	Amount	
			Rs.	Ps.
Total				

Rupees in words: _____

Signature of the Claimant with date

Your bank account details for Transfer of claim amount through **Account Transfer**

NAME of the Account Holder	SB A/C Number in Syndicate Bank, Puthanampatti

Verified:	For COE Office Use only	Passed for Payment
Amount in Rs.		
CONTROLLER OF EXAMINATIONS		