

BILL FOR HONORARIUM OF VISITING FACULTY / OTHER STAFF

CATEGORY:

(To be filled by OIC – Training; Refer IMU-HQ/R/11/37/1/2019/Office Order dated 28.06.2019.)

From:
Capt./Mr./Mrs. _____

Address: _____

To,
Campus Director
IMU Mumbai Port Campus,
Hay Bunder Road,
Mumbai – 400 033.

Sir,

I am submitting herewith a bill for taking classes as visiting faculty at Indian Maritime University – Mumbai Port Campus (LBS CAMSAR) in the month of _____ for _____ course. The details are submitted for payment of honorarium as follows:

PAN _____ Bank A/C No. _____

Nature of A/C: SB _____ Name of the bank _____

Place of the Bank _____ IFSC CODE _____

Sr No.	Day	Date	Duration	Honorarium Claimed	Conveyance Claimed	Total Amount Claimed
Total Amount.....						
(Rupees)

Date :- _____

Name :- _____

Signature:- _____

The Bill verified as per the time management schedule & actual class taken.

OFFICER IN-CHARGE (TRAINING)

COURSE IN-CHARGE

----- FOR OFFICE USE ONLY -----

DEPUTY REGISTRAR

ASSISTANT REGISTRAR (FINANCE)

CAMPUS DIRECTOR