

SHYAMA PRASAD MUKHERJI COLLEGE (FOR WOMEN)
(UNIVERSITY OF DELHI)
PUNJABI BAGH (WEST), NEW DELHI – 110026

BILL FOR PAYMENT OF GUEST LECTURER

Class Taught _____

Name and Address

Date of Lectures

Rate for Lecture / Conveyance

Total amount claimed
(Rs.)

Contact No. _____

Rs. _____

Pan No. _____

1. Certified that I have not claimed any remuneration / conveyance for the above classes earlier.
2. Certified that the amount to claimed and paid shall included in my income for the purpose of Income-Tax.

Signature of the claimant

(Affix Revenue Stamp if the claim is above Rs. 5000/-)

Number of days/lectures verified.

Certified that the teacher has not claimed any
Remuneration/conveyance in this behalf earlier.

H.O.D.

A.O.

PRINCIPAL

Passed for Rs. _____ (Rupees _____) only.

ASSISTANT

SECTION OFFICER A/cs

BURSAR

PRINCIPAL