

**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.)
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_____	_____		_____
_____	_____		_____
_____	_____		_____
_____	_____		_____

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