INDIAN INSTITUTE OF INFORMATION TECHNOLOGY RANCHI

CLAIM FOR REIMBURSEMENT OF TELEPHONE BILLS

Name:		Ι	Designation:		Emp. No:			
Deptt.	SBI Bank A/c No:							
Claims For Telephone No			Period of claim: From TO					
(s):			renou	or ciaiiii. Th	Olli	10		
SN	Telephone No.	PERIOD			Date	Amount		
		From	То	Bill No		Paid	Amt Clain	
1								
2								
3								
4								
5								
6								
7						G. Total		
	Certified that above. Certified that Certified that	No Separate res	the above expe	name. nditure towards tel one has been provio or reimbursement e	ded to the under		d mentioned	
Enci:	Receipts/ bills				Signature of	`Fmployee		
———			(FOR O	TELOF LIGE ON				
			(FOR O	FFICE USE ONI	LY)			
	laim has been ch itted for sanction		s	Only)				
Dealing Asstt.					DR(F&A)			
RG								
Sanct	ioned							

DR(F&A)