भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान बरहमपुर
Indian Institute of Science Education and Research Berhampur
Established by the Ministry of Education, Govt. of India

Claim form for Residential Telephone bill Reimbursement

Name of Employee			
Designation		P.F. No	
Pay in Pay Band		G.P./A.G.P.	
Department / Section			

Rate for reimbursement as per Office Order No.IISERB/DIR/2013/42 dated 5/12/2013

Sr. No.	G.P./A.G.P.	Ceiling Amount	Sr. No.	G.P./A.G.P.	Ceiling Amount
1	HAG Rs.67000/- to 79000/-	2500/-	3	GP Rs.10000/-or AGP Rs.10500/-	2000/-
2	GP Rs.7600/- to 8900/- or AGP Rs.8000 to Rs.9500/-	1500/-	4	GP Rs.5400 to Rs.6600/- or AGP Rs.6000/- to Rs.7000/-	800/-

Sr. No.	For the month of	Bill/Rect. No. & Date	Telephone / Mobile No.		Sub Total (Rs.)
			No:	**No:**	
			Amount (Rs.)	Amount (Rs.)	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
				Grand Total Rs.	

Certificate

Certified that the telephone bills indicated as above have actually been paid by me, Bills/Receipts are enclosed in original and the expenditure is related to official calls from Residential Telephone/Mobile.

Date : **Signature of the employee**

Passed for Rs. :	(Rs. in words)		
Prepared by	Checked by	Recommended by	Approved as per Rules
Office Assistant	Jr. Supdt. / Supdt.	AR(F&A)/ DR (F&A)	FA & C A.