



INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, KALYANI

CONVEYANCE BILL

Date	Particulars of Journey		Purpose of Journey	Mode of Conveyance (Air/Train/Taxi etc.)	Amount (₹)
	From	To			
			In connection with attending Selection/Meeting/Seminar/Workshop/Thesis Viva-voce (B. Tech/Ph. D) at..... (name of Deptt/Centre/Cell) of IIIT, Kalyani.		
	Return Journey				
Total (Rupees.....)					

(Bill may please be attached)

Certified that the return journey will be made by (Air/Train/Taxi) and received
Rs..... (Rupees))

Dated:

(Signature of the Examiner/Expert)

Signature of HoD/Officer

Name (in Block Letters):

Approved

Designation:

Signature of Head (Admin/Academic)

Mobile No:

.....For Office use.....

Please pay Rs.....(Rupees.....) only to Mr./Dr.....
..... Designation.....

Signature of the Dealing Assistant

Signature of the Accounts Officer/Finance Officer

Bank Details

Account Holder Name as Per Bank Record: - _____

Bank Name: _____

Account Number: _____

IFSC Code: _____

Personal Details:

Bate of Birth: _____ / _____ / _____

Aadhaar Number: _____

PAN: _____

Mobile: _____

e-Mail: _____

Address: _____

(Signature of the Examiner/Expert)