**INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, KALYANI**

**FORM-I**

Ref. No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CPDA Claim for reimbursement/ payment

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| I. **Membership for Professional Bodies** Within the limit of Rs. 15,000/- p.a., membership for Enclosed prior approval of the Registrar. two professional bodies per year can be availed. |

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| II. **Registration Fees (for attending** Enclosed necessary approval of the Dean, FacultyAffairs.  **Seminar/ Conference**) Actual with a maximum limit osUS$800-for International. |

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| **II. Purchase of Books**  | Bills pertaining to purchase of books should be sent with due certification by Faculty while sending for reimbursement. Amount is restricted to Rs. 10,000/-. For purchase of books of more than the limit, prior approval of Director is required. |

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| III. **Contingent Expenditure (Limited to Rs. 80,000/- p.a.)**Equipment, consumable , contingency expenditure etc. | Reimbursement must have certifications by faculty that the items are procured for Professional Development. Prior approval of Director is necessary for reimbursement and any item which is not explicatory mentioned in the list of Contingent expenditure.There is no cap on amount that can be spent on contingent purchases within the CPDA. |

Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following is the statement of account for the membership of Professional Bodies, purchase of stationery/books and any other contingent items for professional development vide Office Order no...................................................................................... dated......................................... The relevant cash memos/bills/vouchers are enclosed herewith:-

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S No.** | **Items** | **Invoice No.** | **Date** | **Vendor/ Professional body** | **Amount (in Rs.)** | **Justification** |
| 01. |  |  |  |  |  |  |
| 02. |  |  |  |  |  |  |
| 03. |  |  |  |  |  |  |
| 04. |  |  |  |  |  |  |
| 05. |  |  |  |  |  |  |
| 06. |  |  |  |  |  |  |
| 07. |  |  |  |  |  |  |

**INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, KALYANI**

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| --- | --- | --- | --- | --- | --- | --- |
| **Sl. No** | **Items** | **Invoice No** | **Date** | **Vendor/Professional Body** | **Amount (in Rs.)** | **Justification** |
| 08. |  |  |  |  |  |  |
| 09. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |
| 13. |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |
| Total |  |  |

Stock entry has been at Stock Book No \_\_\_\_\_\_\_ of page No\_\_\_\_\_\_\_\_\_\_ of SI .No.\_\_\_\_\_\_\_\_\_ of stock register and also back side of the original bill with certification

Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Rupees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Only) may be reimbursed/paid directly to the vendor .

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant

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| **Forwarded by** REGISTRAR  |

***N.B.: This Form is to be deposited to the Accounts Section along with the bills /vouchers etc. and the office order issued by the Registrar***

**For Office Use Accounts Section**

Allotment Head: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Token No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expenditure Head: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount checked & verified and found correct Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Rupees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (may be reimbursed / paid to the vendor

|  |  |  |
| --- | --- | --- |
| Signature of the Dealing Officer | Signature of theAssistant Registrar (Finance) | Signature of theRegistrar (Offg.) |