



Remuneration Bill by Indian Examiner

1. Name of the External Examiner	:	Prof. / Dr.											
2. Mobile Phone Number of the External Examiner	:	+91											
3. Email Address of the External Examiner	:	@											
4. Address of the Examiner (required by PMFS for making payment)													
5. Name, Roll Number and Department/ Center of the PhD Student:													
6.. Name(s) of Supervisors:													
7. Date of PhD Thesis Oral (Viva-Voce) Examination	:				/				/	2	0	1	
8. Details of Bill Claimed													
(a) Honorarium for Thesis Evaluation	:	(Payment from Account Code 57.1)											
(b) Honorarium for Examiner of Thesis Oral Examination	:	Rs.5,000/- (Payment from Account Code 57.1)											
(c) Contingency (like Postage Expenses, etc) Please enclose the supporting document: Voucher / Bill / Receipt	:	Rs. (Payment from Account Code 57.5)											
(d) Amount Claimed for Payment to the External Examiner related to his/her travel in the TA Bill enclosed herewith	:	Rs. (Payment from A/C 57.2) (Claimed in the enclosed TA Bill)											
(e) Total Amount Claimed (= (a)+(b)+(c)+(d))	:	Rs.											
9. Details of Bank Account of External Examiner (To transfer the approved amount of this bill through online transfer):													
Name of the Account Holder: (Write in Block Letters)													
Account Number:													
Name of the Bank:													
Name of the Branch:													
IFSC: (Indian Financial System Code)													

Please deposit the approved amount of this bill and the TA bill enclosed herewith related to my travel to IIT Guwahati for conducting the PhD Thesis Viva-Voce Examination in the above mentioned bank account.

Date:
Put up for approval

Signature of the External Examiner
Approved

Signature (with Date) of Dealing Staff of Academic Affairs Section
(For the Use of Finance & Accounts Section)

Dean of Academic Affairs

Passed for payment of Rs. _____ (Rupees

Dealing Assistant

Accountant

Assistant Registrar (F&A)

Deputy / Joint Registrar (F&A)