

## भारतीय प्रौद्योगिकि संस्थान (भारतीय खनि विद्यापीठ) धनबाद INDIAN INSTITUTE OF TECHNOLOGY (INDIAN SCHOOL OF MINES) DHANBAD -826004

## TELEPHONE/ DATA/ BROADBAND CLAIM FORM

Name	D	Designation		Emp No	
Deptt	Ba	asic Pay		A/c No	
Period of	f Claim From				

Claim for Telephone No.(s)

S	Telephone No.	Peri	od	Bill No & Date	Amount	Amount Claimed
No.		From	То		Paid	

## **Certified that:**

1) Telephone Bills/Broad Band/ Data pack is in the name of employee used for official purpose.

2) The claim does not include any DTH plan.

3) I have not claimed the above for reimbursement elsewhere.

Encl: Receipt / Bills (Mobile number against which the reimbursement is sought should be in the name of the employee and relevant documents (invoices) to this extent are required to be enclosed.

Date:		Signature of Employee
The claim has been checked and found to be i	(FOR OFFICE USE ONLY) n order.	
Submitted for sanction of Rs	(Rupees	
only)		
Dealing Assistant	AR (F&A)	JR (F&A)
Sancti	oned ₹	
	Registrar	
Passed for payment of ₹	(Rupees	only)