



C. U. SHAH UNIVERSITY

Wadhwan City

Ann. No.13

(Revised)

SQUAD's REMUNERATION BILL

(Winter/Summer Examination _____)

Full Name: _____ Designation: _____

Employer's Institute Name: _____ Mobile No: _____

E-Mail ID: _____

University Authority letter No _____ Date: _____

(Copy should be attached)

Bank Account Details:

Name of Bank _____ Account No.: _____

Branch _____ IFSC Code: _____

Bill for performing the duties as Squad at Examination places

Details of Squad's Bill

Sr. No.	Place of deputation	Date	Session		Total Sessions	Rate per Session	Total Amount
			Morning Session	Evening Session			

Rupees (In words): _____

(Sign. of Claimant)

CERTIFICATE

It is to certify that the details shown above are true and that the claim made in this bill is correct according to the Rules/Norms of the University as amended from time to time

(Exam co-ordinator)

(Sign. of Claimant)

(FOR USE OF UNIVERSITY OFFICE ONLY)

CERTIFICATE

It is to certify that the details mentioned above in this bill have been verified and found correct according to the rules/norms of the university as amended from time to time.

Date: _____

 Controller of Examination

 Pro Vice-Chancellor

CERTIFICATE

It is to certify that the amount claimed in this bill has been verified and found correct according to the rules/norms of the university as amended from time to time

It is also to certify that this bill has not been paid previously and presented for the first time

Admitted for Rs: _____

Objected for Rs: _____

Reasons for Objection Rs: _____

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Section Officer
 Exam. Branch