

Voucher No. _____

INDIAN INSTITUTE OF SCIENCE, BANGALORE-560 012.

DETAILED CONTINGENT BILL

Department of _____

| No. of Sub-Voucher | Head of Account | Particulars of Expenditure | Amount | | Total | |
|--------------------|-----------------|----------------------------|--------|----|-------|----|
| | | | Rs. | P. | Rs. | P. |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

I certify that the expenditure charged in this bill could not, with due regard to the interest of the Institute be avoided, and that items of consumable stores included in this bill were not available in the Central Stores. Vouchers for terms of expenditure paid for are attached to the bill. In case of items for which payee's receipts are not attached. I Certify that relative amounts have been paid to the parties entitled to them and payee's receipt could not be obtained.

CHAIRMAN

Certified of payment of Rs. _____

Dept. _____