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| LOGO_IISC.jpg | | **INDIAN INSTITUTE OF SCIENCE  BANGALORE – 560 012** | | | | | | | | | | | | | |
| REIMBURSEMENT REQUEST FOR ONLINE PURCHASES | | | | | | | | | | | | | | | |
| Name of the Person requesting reimbursement | | | | : |  | | | | | SAP No | | | : |  | |
| Emp ID | | | | : |  | | | | |  | | |  |  | |
| Department / Centre | | | | : | ECE | | | | | Date | | | : |  | |
| **To: The Financial Controller, IISc** | | | | | | | | | | | | | | | |
| Please reimburse the amount to, | | | | | | | | | | | | | | | |
| * Name | | | | : |  | | | | | | | | | | |
| * Bank Account No. and Name of the bank | | | | : |  | | | | | | | | | | |
| Details of purchases (the value of each distinct item must be strictly less than 1,00,000) | | | | | | | | | | | | | | | |
| **Sl. No.** | **Item Description** | | | | | | **Qty.** | **Unit** | **Rate** | | | **GST** | | | **Amount** |
| 1 |  | | | | | |  |  |  | | |  | | |  |
| 2 |  | | | | | |  |  |  | | |  | | |  |
| 3 |  | | | | | |  |  |  | | |  | | |  |
|  | |  | Total: | | | | | | | | | | | |  |
| Total Amount (In words): | | | | | | | | | | | | | | | |
| Debit Head: | | | | | | | | | | | | | | |  |
| * Goods received in satisfactory condition. * Entered into the Department Equipment and Consumable Register (if applicable),   Number in the Register: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Explicitly mention for all items entered into the register)   * Credit card statement / Proof of payment enclosed. * Payment receipt from online vendor enclosed. * Certified that the material procured online has not been returned for any reason.  |  | | --- | | Justification for online purchase: | | | | | | | | | | | | | | | | |
| Signature of the  Person claiming | | | | | |  | | | | | Signature of  Chair of the Department | | | | |