



Vr No
Date:

CHHATTISGARH SWAMI VIVEKANAND TECHNICAL UNIVERSITY, BHILAI

Remuneration Bill/Money Receipt of Laboratory Staff (Class III and IV) for Practical Examination

Semester: Branch: Subject:

Name of External Examiner: Name of Internal Examiner:

No. of Students Appeared:

I promise to refund the amount paid in excess if any

Class III Staff				Class IV Staff			
S No	Name	Remuneration Paid	Signature	S No	Name	Remuneration Paid	Signature
Total Rs				Total Rs			

Certified that the above staff were engaged in the examination work.

Sign of Internal Examiner

Sign of HoD

Total amount Paid Rs (In Words: Rs)

Exam Supdt's Sign with Seal
Diploma/BE/ME/MCA/BArch Sem Exam

Controller Exam
CSVТУ, Bhilai