

INSTITUE OF AERONAUTICAL ENGINEERING

(Autonomous) Dundigal, Hyderabad – 500 043

EXAMINATION BRANCH

BILL FOR REMUNERATION TO EXAMINERS FOR EVALUATION OF ANSWER BOOKS

	Semester Regular / Supplementary (Month & Year)
Name of the Examiner (in block letters)	
Address	
Telephone / Mobile No	
Name of the examination	
Course	
Course Code	
No. of Answer Books examined	
Total Remuneration	
Total Remuneration in words	
Date:	
	Signature of Examiner
	RECEIVED PAYMENT
	Signature on On Rupee Revenue Stamp if exceeding Rs. 1000/-
FOI	R OFFICE USE ONLY
claim preferred in this bill has been vo	erified and is found in order. The bill may be passed. Passed only)

CONTROLLER OF EXAMINATIONS