

CENTRE FOR RESEARCH
ANNA UNIVERSITY OF TECHNOLOGY CHENNAI

CLAIM BILL for HOSPITALITY

This claim should be made separately by the Supervisor towards refreshment expenses only
incurred on the day of DC/ Viva-Voce

1	Name of the Scholar	:	
2	Registration No.	:	Category : FT/PT
3	Date of DC / Oral Examination (Viva-Voce)	:	
4	Venue of the Meeting	:	
5	Name of the Supervisor with full Address	:	
	Hospitality charges for DC/Oral Examination meetings. (Original printed bill duly certified by the Supervisor should be produced for reimbursement) *		
	Total		

* Subject to a maximum of Rs. 500 only

Signature of the Supervisor
(Name with Seal)