

INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR P.O. Botanic Garden, Dist- Howrah, Pin-711 103, West Bengal, India

CONVEYANCE BILL

Date	Particulars of JourneyFromTo		Purpose of Journey	Mode of Conveyance (Air/Train/Taxi etc.)	Amount (₹)
	Return	<u>Journey</u>	In connection with attending Selection/Meeting/Seminar/Workshop/Thesis Viva-voce (ME/M. Tech/Ph. D) at (name of Deptt/School/Centre/Cell) of IIEST, Shibpur.		
Total (Rupees) Certified that the return journey will be made by (Air/Train/Taxi) and received					

Certifica that the retain journey will be made by (ing i	runy ruxi) unu recerveu		
Rs (Rupees)		
Dated:	(Signature of the Examiner/Expert)		
Signature of HoD/Officer	Name (in Block Letters):		
Approved	Designation:		
Signature of Dean (Admin/Academic)	Mobile No:		
For Off	fice use		
Please pay Rs(Rupees) only to Mr./Dr		
Designation			

Signature of the Dealing Assistant

Signature of the Accounts Officer/Finance Officer