INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR

FORM - I												
Ref. No				Date :								
CPDA Claim for reimbursement/payment												
I. M	embership for Profess Within the limit of Re two professional bod	s.15,000/- p.a., me	•	Enclosed prior approval of the I	Enclosed prior approval of the Dean, Faculty Affairs.							
II. R	egistration Fees (for	attending		Enclosed necessary approval of	Enclosed necessary approval of the Dean, Faculty Affairs.							
S	eminar/Conference)			Actual with a maximum limit o	Actual with a maximum limit of US\$ 800 – for International							
				1 0 1	Bills pertaining to purchase of books should be sent with due							
III. <u>P</u>	urchase of Books				certification by Faculty while sending for reimbursement. Amount is restricted to Rs.10,000/ For purchase of books of more than the limit, prior approval of Director is required.							
H S I	Contingent Expenditu Equipment related to profess Tab, Printer, Scanner, Internette. However, for any other lought. Internet usage charges, procencluding USB Wireless US	sional activities such let Charges and Com items, explicit permi	as PC, Laptop aputer Peripheral ission may be	procured for Professional Devels: necessary for reimbursement ar mentioned in the list of Conting Only one Laptop in a block of 3 There is no cap on amount that: within the CPDA.	Reimbursement must have certifications by Faculty that the items are procured for Professional Development. Prior approval of Director is necessary for reimbursement and any item which is not explicatory mentioned in the list of Contingent expenditure Only one Laptop in a block of 3 years. There is no cap on amount that can be spent on contingent purchases within the CPDA. Rs.15,000/- in one financial year.							
Name :												
Desig	gnation :											
Depa	rtment :											
The following is the statement of account for the Membership of Professional Bodies, purchase of stationery/books, computers and related items/electronic devices and any other contingent items for professional development vide Office Order No												
Sl. No.	Items	Invoice No.	Date	Vendor/ Professional Body	Amount (in Rs.)	Justification						
01.												
02.												
03.												
04.												
05.												
06.												
07												

INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR

Sl. No.	Items	Invoice No.	Date	Vendor/ Professional Body	Amount (in Rs.)	Justification			
08.				Body	(III KS.)				
09.									
10.									
11.									
12.									
13.									
14.									
		TOTA	L						
	entry has been done at Soriginal bill with certific		f page No	of Department CPDA s	tock register and	also back side			
Rs	(Rup	ees				only)			
may b	e reimbursed / paid dire	ctly to the vendo	r.						
Date :	Date : Signature of Applicant								
			Head of the	he Department					
N.B. :	This form is to be depo		ounts Section	n alongwith the bills/vouchers	etc. and the offic	e order issued			
			For Office	Use (Accounts Section)					
Allotment Head :				Token No. :					
Expenditure Head :				Date :					
Amou	nt checked & verified a	nd found correct	Rs						
_) may	be reimbursed /			
paid to	o the vendor.								
Dealing Asstt. (Accounts) Signature of the Accounts Officer Signature of the Finance Officer									

CPDA Claim Form-I – Page 2 of 2