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|  | IHUB DRISHTI FOUNDATION Regd. Office:C/o INDIAN INSTITUTE OF TECHNOLOGY JODHPUR NH 62, Nagaur Road, Karwar-342030, Jodhpur (Rajasthan) CIN: U73100RJ2020NPL070417 |

**Reimbursement for Expenditure**

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| --- | --- | --- |
| 1. | Name  |  |
| 2. | Purpose of Expenditure |  |
| 3. | Reimbursement to be made in the Name of |  |
| 4. | Bank Account details for Fund Transfer  |
| 1. Name of Account Holder |  |
| 2. Bank Name and Branch |  |
| 3. Account Number |  |
| 4. IFSC Code |  |

Details of Bills claimed

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S.No. | Date | Invoice/Bill No. | Suppliers Name | Particulars | Stock-Register Page No. | Amount (Rs.) |
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 Amount in Words:

 Signature

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| For Office of Accounts use only |
| S. No. | Item | Details |
| 1 | Amount Claimed |  |
| 2 | Advance Paid/Adjusted |  |
| 3 | Passed for Reimbursement |  |
| 4. | Head of Expenditure |  |
| Manager Finance Accounts Officer |
| Approval accorded/not accorded  Signature of Director /CEO |