



CENTRAL UNIVERSITY OF KASHMIR

BILL Form No.

BILL FOR HONORARIUM OF GUEST FACULTY/EXPERT

Name of the Guest Faculty/Corporate Speaker/Expert.....

Designation..... Mob. No.....

Address.....

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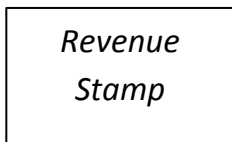
Detail of Lecturers Delivered/Sessions held

S. No	Date	Programme	Course	Lecture Title	Honorarium / Lecture/Session	Amount

Total Amount _____ Rupees (In Words) _____

Certified that the lecture(s)/sessions have been delivered/conducted on the dates as specified above in conformity with the University Letter/Order No. _____ Dated _____

GUEST FACULTY/CORPORATE SPEAKER/EXPERT



Signature: _____

Date: _____

CERTIFICATE BY CORDINATOR/HEAD OF DEPARTMENT

Certified that the lecture(s) delivered by _____ were in line with the requirements of the department. Hence the Bill of _____ is forwarded to the Academic Section for further necessary action.

CORDINATOR/HEAD OF DEPARTMENT