

All India Institute of Medical Sciences, Mangalagiri

Reimbursement of Newspaper purchased/supplies to officers

(Statement to be furnished on half yearly basis to Accounts Section)

Name of the applicant :

Designation :

Department :

Pay Level & Basic Pay (Rs.) :

I certify that I have spent Rs. _____ Towards purchases of newspapers(s)
for the month of

i. Jan –June, 20__

OR

ii. July-December, 20__

(only one option is to be ticked)

I further declare that (i) the newspaper(s) in respect of which reimbursement is claimed is /
are purchased by me. ii) the amount for which reimbursement is being claimed has actually been
paid by me and has not /will not be claimed by any other source.

Date: _____

Signature:

Name: