

OFFICE OF THE DIRECTOR OF RESEARCH AND CONSULTANCY
BENGAL ENGINEERING AND SCIENCE UNIVERSITY, SHIBPUR, HOWRAH 711 103

Debit Voucher

No. : _____

Date: _____

University Project / Consultancy Code: _____ / _____ / _____ / _____ / _____ / _____
(DRC) / (Agency-Type) / (Dept.) / (PI) / (Sl. No.) / (Fin.Yr.)

Head of the Expenditure: _____

Details of Expenditure: _____

To be paid to: M/s./Dr./Prof./Mr./Ms. : _____

Amount Rs. _____ (Rupees: _____) only.

Attachments (if any): _____

Payment details: Rs. _____ by Cash/Cheque No. _____, dt. _____

Signature of PI/Consultant/Others
with seal
Date: _____

Payment approved by
with seal
Date: _____

Received Rs. _____ vide cheque / cash (as per above details) on (date) _____

Date: _____

(Receiver's Signature) with seal (if any)

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