Submission Date:

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PRE-RECEIPTED BILL FOR PRACTICAL / VIVA VOCE & THESIS EXAMINER

ABBOTTABAD UNIVERSITY OF SCIENCE & TECHNOLOGY

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Select Examiner:		Select Examiner:		
Examination:	Select:	Examination:	Select:	
Examiner Name:		Examiner Name:		
Address:		Address:		
Examination Centre:		Examination Centre:		
Subject:		Subject:		
No. of Students Examined: No. of paper set:	No. of scripts marked:	No. of Students Examined: No. of paper set:	No. of scripts marked:	
FOR SECRECY SECTION (Do not fill the Amount)		FOR SECRECY SECTION (Do not fill the Amount)		
Received from the Assistant Treasurer, Abbottabad University a sum of Rs.	remuneration.	Received from the Assistant Treasurer, Abbottabad University a sum of Rs.	remuneration.	
Examiner Signature		Examiner Signature		
IMPORTANT NOTE:		IMPORTANT NOTE:		
 No Payment will be made unless this bill is recieved properly signed & stamp affixed 	Revenue Revenue Stamp	No Payment will be made unless this bill is recieved properly signed & restamp affixed	evenue Revenue	
2. Bill should be sent alongwith the award lists / attendance sheet etc. wit after the examination	th in a week 0.40/80	2. Bill should be sent along with the award lists / attendance sheet etc. with after the examination	Stomm	

Submission Date: