

## ABV INDIAN INSTITUTE OF INFORMATION TECHNOLOGY & MANAGEMENT GWALIOR

### REIMBURSEMENT OF CELLULAR (MOBILE) AND DATA CARD CLAIMS

1. Name:-

2. Emp Code No:-  3. Designation:-

3. Department:-  4. Grade pay:-

4. Claim period:- from  To

5. Claim for reimbursement:-

a) Telephone/ mobile charges paid by claimant\*\*

Month/ Year	Telephone/ Mobile No	Amount (Rs.)

b) Data Card Charges paid by claimant \*

Month/Year	Telephone No	Amount (Rs.)
<b>Total (a+b)</b>		

#### DECLARATION

I hereby declare that above Telephone(s)/ Mobile (s)/Data card is/ are in my name and used for official purpose. I also declare that above reimbursement is not claimed from any other sources.

**Date:-**

**Signature**

List of enclosures:-

\*\* Bill/ voucher/ proof of payment in original with bill No. & Date duly verified by the claimant, be attached.