



Form ID: DYP CET: Account/03

Date: _____

EXPENDITURE SUBMISSION FORM

Name of Activity Coordinator _____ Department _____

Activity: _____

Sr. No	Expenditure Details	Amount (Rs)
Total Expenditure		
Advance taken if any		
Remaining/Excess Amount		

Forwarded by (Dean/HoD): _____

Checked by (Account Section) _____

Approved By:

Registrar

Principal

Executive Director

Remaining/Excess amount submitted details: By Cash/Cheque/Online transaction

Cheque/DD/Online Transaction details _____ Date: _____

Note: Attach advance/ Consent Letter and all bills along with this form and submit to account section