



Form ID: DYP CET: Account/04

Date: \_\_\_\_\_

**VOUCHER FOR HONORARIUM AND TRAVEL**  
**(FOR EXTERNAL MEMBER ONLY)**

Resource Person Name (As per Bank Account): \_\_\_\_\_

Address: \_\_\_\_\_

Towards Honorarium for (Title for Activity): \_\_\_\_\_

of Department \_\_\_\_\_ Activity Date: \_\_\_\_\_

Sr. No	Particulars	Amount (Rs.)
1.	Honorarium	
2.	A. Local Conveyance: OR B. Travel Allowance: From: _____ To DYP CET, Kolhapur. i) Kms. _____ x Rate/Km (Rs. 12/-) = _____ ii) Toll Receipts amount = _____ OR C. Bus/Train (2AC) Ticket = _____	
Total Claimed Amount (1 + 2)		

Bank Details of Resource Person: - Mobile No. \_\_\_\_\_

Name of Bank		Name of Branch	
A/c. No.		IFSC No.	

Resource Person

Activity  
Coordinator

Dean/HoD

Registrar

Principal

Submit duly signed form along with receipts/ticket (if any) to account section for further process

Approved By AICTE, New Delhi, Recognised by Govt. of Maharashtra & Affiliated to Shivaji University, Kolhapur.