To The Dean CUTM-PKD

Sub: Request for approval to attend "4th International Conference on Management, Science, Engineering and Application (ICMSEA-2019)" from 19th to 21st Dec 2019 at CUTM-PKD campus.

Dear Madam,

I am(Niranjan Barik) request you to grant permission to attend "4th International Conference on Management, Science, Engineering and Application (ICMSEA-2019)" from 19th to 21st Dec 2019 at CUTM-PKD campus.

Conference registration fee may kindly be reimbursed.

Thanking you

With Regards

Niranjan Barik

5-9-12



## **JAGANNATH INSTITUTE FOR TECHNOLOGY & MANAGEMENT**

**PARALAKHEMUNDI** 

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| Date |
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| SI. No. | Details of Expenditure            | Amount (Rs.) | Amount (Rs.) |
|---------|-----------------------------------|--------------|--------------|
| 01      | Reyntration for                   | 25NJ-        |              |
| 02      |                                   |              | 2500/-       |
| 03      |                                   |              |              |
| 04      |                                   |              |              |
| 05      |                                   |              |              |
| 06      |                                   |              |              |
| 07      |                                   |              |              |
| 08      |                                   |              |              |
| 09      |                                   |              |              |
| 10      |                                   |              |              |
| 11      |                                   |              |              |
| 12      |                                   |              |              |
|         | Total Expenditure :               | 2500-        | 2500/-       |
|         |                                   |              |              |
|         | Less advance taken (if any) :     |              |              |
|         |                                   |              |              |
|         | Balance to be (Refund/ Payment) : |              |              |

|                       | Code do                  |            |
|-----------------------|--------------------------|------------|
| Signature of Claimant | Recommended by           | Checked by |
|                       | (Dean/Dy. Registrar/HOD) |            |
|                       |                          |            |

Dy. Registrar Finance

Registrar

## JITM 2019 - 2020

At - Village Alluri Nagar, P.O. - R Sitapur, Via- Uppalada Paralakhemundi, Dist: Gajapati – 761211, Odisha, India Phone: (06815) 222999, 223088, Fax: (06815) 222150

## Journal Voucher

No. : JV/03/129

On Account of:

Being the expenses incurred by Niranjan Barik for conference purpose is now accounted.

Dated: 30-Ja Particulars Debit Conference Registation fee Cre To Niranjan Barik Dr ₹ 2500.00 ₹ 2500.00

Authorised Signatory

₹ 2500.00

₹ 2500.00