

V.O.CHIDAMBARANAR PORT TRUST

MEDICAL DEPARTMENT

REMUNERATION BILL OF CONTRACT STAFF

Name :
Designation :
Reference No. & Date :
Date of Attendance :
Month and year :
Rate of Remuneration :
No. of days attended :
Amount claimed :

It is certified that the above individual attended duty on the date indicated above and the claim may be admitted.

SR. NURSE

Sr. Dy. CMO / SMO

STAMPED RECEIPT

Received Rs. (Rupees
..... only) towards the Remuneration charges for the
month of from the Financial Adviser and Chief Accounts Officer,
V.O.Chidambaranar Port Trust, Tuticorin – 4.

SIGNATURE

Name :

Designation :

Rev. : 2

QMD / DOC / FRI