



GOVERNMENT OF NCT OF DELHI
Delhi Subordinate Services Selection Board
FC-18, INSTITUTIONAL AREA, KARKARDOOMA, DELHI-110092
TELEPHONE - 22370100

ANNEXURE-V

BILL OF CONTINGENCY EXPENDITURE INCURRED

CENTRE CODE: _____

CENTRE CODE: _____

Name of the Centre : _____

Name of the Examination : _____

Sl.	Exam functionary	No. of shifts	No. of Officers/officials	Rate of Remuneration (as approved by Board) (Rs.)	Amount Disbursed (Rs.)
1	CENTRE SUPDT.				
2	CHIEF INVIGILATOR				
3	ASSTT. CENTRE SUPDT.				
4	INVIGILATOR Remuneration				
5	CLERKS Remuneration				
6	CLASS-IV Remuneration				
7	MISC EXPENDITURE				
8	ANY OTHER CHARGES				
9	TOTAL EXPENDITURE				
10	TOTAL AMOUNT OF ADVANCE RECEIVED				
11	BALANCE (IF ANY)				

CERTIFICATE

- I certify that I have acted as Centre Superintendent.
- I certify that the expenditure shown in this bill could not, with due regard to the interest of the public service, be avoided. I have satisfied myself that all expenditure shown in this bill have been paid. Vouchers for all expenditure incurred are attached to this bill.
- I certify that all vouchers have duly been stamped, cancelled and forwarded to the Board office for safe custody.
- I certify that the functionaries utilised for the conduct of the aforesaid examination have been paid remuneration.
- I certify that all the officials whose remuneration is claimed in this bill have performed duties for the conduct of the said examination.
- I certify that all the officials, whose remuneration is claimed, are teaching/clerical/other staff of this school only. In case of teaching staff of other Govt. Schools, the prior permission of Board has been obtained.

(Signature & Stamp of Centre Superintendent)

