

ICAR-INDIAN INSTITUTE OF SUGARCANE RESEARCH, LUCKNOW 226 002

Sl. No.	Particulars	
1	Name (In Capital Letters)	
2	Designation	
3	Section/Department	
4	Pay Level & Basis Pay (Rs.)	

I Certify that I have spent towards purchase of Newspaper(s) from the month of April 2018 to Dec. 2018. I further declare that

(i) The Newspaper(s) in respect of which reimbursement is claimed, is/are purchased by me.

(ii) The amount for which reimbursement is being claimed has actually been paid by me and has not/will not be claimed by any other source.

Date: _____ Signature: _____

Name: _____

ERP No. _____

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