



INDIAN INSTITUTE OF SCIENCE
BANGALORE – 560012

CLAIM FORM FOR TELEPHONE REIMBURSEMENT

NAME:

DESIGNATION

DEPARTMENT: **ELECTRICAL ENGINEERING**

EMPLOYEE NO:

To

The Financial Controller,
IISc., Bangalore 560012

Kindly arrange to reimburse Telephone charges of Rs. for the period from to details given below. The amount may be credited to my bank account:

Landline Telephone No.		Mobile No.		
Month	Billed Amount		Total	Claimed Amount (Max. Rs. 750/-550/* p.m)
	Landline	Mobile		
Total - Telephone Charges (A)				
Broadband Charges:				(Max. Rs. 250/- p.m)
Total – Broadband (B)				
Grand Total (A+B)				

*Applicable where Centrex line without '0' facility has been provided at residence.

1. Certified that I have been/have not been provided with Centrax Line at my residence.
2. Certified that the above telephones are in my name.
3. Certified that I have incurred the above expenditure towards telephone charges during the period mentioned above. Also certified that only the excess over Rs. 750/- p.m. in r/o Telephone Charges will be claimed for reimbursement from other sources.

Date:

Signature