

T. I. Account of Sh. _____

1. Details of Expenditure is us under:

Sr. No.	Bill No.	Dated	Name of Firm / Person	Amount of Bill
1.				
2.				
3.				
4.				
5.				
6.				
TOTAL				

2. Statement of Expenditure by T. I. Holder:

- i. Name of Fund / Scheme from which T. I. Given: (Please \checkmark Mark which is applicable)
 - Student Fund
 - Any Scheme (Write name of Scheme)
- ii. Amount of T. I.: Rs. _____
- iii. Date on which T. I. taken: _____
- iv. Amount of Expenditure : Rs. _____
- v. Balance / Excess : Rs. _____

Signature of T. I. Holder

3. Receipt of Balance Amount by Cashier (If any)

- i. Balance Amount Received from the above detailed: Rs. _____
- ii. Date on which Balance Amount received : _____

Signature of Cashier