

PDVVPF's College of Pharmacy - (From 1-Apr-2013)

Cash Payment Voucher

No. : 801

Dated : 16-Mar-20

Particulars	Amount
Account : Travelling Exps-Staff	993.00
	Rs. 993.00

Through :

Cash

On Account of :

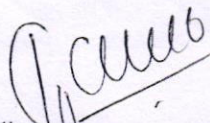
Being amount paid to Dr.R.L.Sawant against exp. at sinhgad college Mapco meeting pune for official work as per bill & sanction.

Amount (in words) :

Indian Rupees Nine Hundred Ninety Three Only

Receiver's Signature:

Checked by


Authorised Signatory

Verified by

RECEIPT

Date: 10/13/2016

Received with thanks from Principal, Padmashree Dr. Vithalrao Vikhe

Patil Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees

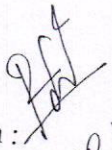
In cash/By Cheque/D.D.No.....Dated / / 2016

Drawn on

Bill no.....Dated / / 2016

On Account of

Rs. 993/-

Sign: 
Name: Dr. R. L. Sawant



Hotel

Mob. : 9822743177 / 9421079723

Savali Garden

FAMILY GARDEN RESTAURANT & BAR

Koregaon Bhima, Pune - Nagar Road, Tal. Shirur, Dist. Pune - 412 216.

Id. : 1720

Date :

Name :

Particulars	Nos.	Amount	
		Rs.	Ps.
Conk Au' juu	1	300	00
Mi' wye	4	88	00
Mi' vea	1	100	00
Over	10	100	00
Con' Korden	1	170	00
5 Rice	2	160	00
Mi' 5 meo	3	75	00
Thank You!	TOTAL	993	00

993/✓

For Hotel Bagic

029 16/03/2016

To

The Principal

PDVP's College of Pharmacy

Ahmednagar

Sub: Sanction of expenses.

With respect to above subject I undersigned
also with ~~the~~ Hon. Principal ^{have} attended MARCO
meeting at Srinagar College of
Pharmacy, Vadgaon Pune. on 13/03/2016.

Kindly sanction Rs. 993/- towards the
food expenses of three persons during
the visit.

Thanking you

A/C
sanctioned Rs. 993/-
16/3/16.

yours truly
P. P. P.
Dr. R. L. S. S.

PDVVPF's College of Pharmacy - (From 1-Apr-2013)
Vilad Ghat
Ahmednagar

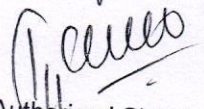
Cash Payment Voucher

No. : 319

Dated : 15-Sep-2015

Particulars	Amount
Account : Travelling Exps-Staff	678.00
Through : Cash	
On Account of : being travelling exp. prof Nangare A K of pimpari pune as per sanctioned.	
Amount (in words) : Indian Rupees Six Hundred Seventy Eight Only	
	Rs. 678.00

Receiver's Signature:


Authorised Signatory

Checked by


Verified by

RECEIPT

Date : 15/9/2015

Received with thanks from Padmashree Dr. Vithalrao Vikhe Patil Foundation's
College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees ... six hundred seventy eight only ...

In cash/By Cheque/D.D. No. cash Dated 15/9/2015

Drawn on

Bill no. Dated / /2015

On Account of

Rs. 678/-

Sign :



Name : A. K. Nangare

Padmashree Dr. Vithalrao Vikhe Patil Foundation's,
College of Pharmacy ,
Ahmednagar.

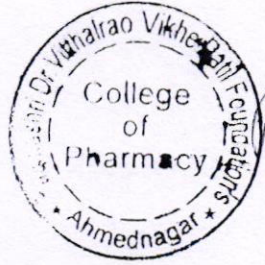
Ref. No. . Coph / Estt. / 2015 / 1167

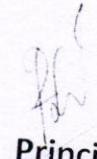
Date : 10 / 9 / 2015

:: OFFICE ORDER ::

Prof. A.K. Nangare (Asst. Professor) is deputed to Pune on 12th Sept. 2015 (Sat.) for orientation workshop at PD.Dr. D.Y. Patil Inst. Of Pharmaceutical Sci. & Research, Pimpri, Pune.

He is entitled for T.A & D.A. as per rule.




Principal
College of Pharmacy,
Ahmednagar

Copy to :

- 1) Prof. A.K.Nangare 2) Estt.Section 3) A/C Section

2081204

पुणे महानगर परिवहन महामंडळ लि.

जाताना **NN-9** येताना

१	१३	२५	२५	१३	१
२	१४	२६	२६	१४	२
३	१५	२७	२७	१५	३
४	१६	२८	२८	१६	४
५	१७	२९	२९	१७	५
६	१८	३०	३०	१८	६
७	१९	३१	३१	१९	७
८	२०	३२	३२	२०	८
९	२१	३३	३३	२१	९
१०	२२	३४	३४	२२	१०
११	२३	३५	३५	२३	११
१२	२४	३६	३६	२४	१२

११८५
स. १५
पैसे

नियमानुसार दिलेले तिकिट

स.प. नं. २४ अ. ११
क्र. : ०९२६९९ १२/०९/९५ १८:१४:३७
NIGHT EXPRESS 01062053

शिवजीनगर पुणे ते अहमदनगर

प्रवासाचे एकूण टप्पे = २०.०

ए.रु. : १४९.००

१४९.००

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

1) Name and Designation : Prof. Ajit K. Nangare 2) Basic Pay Rs : _____ Date : 14/9/2015

3) Purpose of journey and order No. Orientalia workshop on APII at Pimpri, Pune [order No: Cpb/estt/2015/1167]

Date	From		To		Mode of conveyance i.e, by Rail /S,T, / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure	Date	Place				
12/9/15	A. Nagar Stand	6 am	12/9/15	Shivajinagar Pune	Private Bus.	120 km	150/-	150/-
12/9/15	Shivajinagar Pune	9.15 am	12/9/15	Vallabh Nagar	P.M.T.	18 km	19/-	19/-
12/9/15	Vallabh Nagar	9.35 am	12/9/15	S.T. Nagar	Auto	05 km	45/-	45/-
12/9/15	S.T. Nagar	5 pm	12/9/15	Vallabh Nagar	Auto	5 km	45/-	45/-
12/9/15	Vallabh Nagar	6.15 pm	12/9/15	Shivaji Nagar	Private van	18 km	50/-	50/-
12/9/15	Shivajinagar	7 pm	12/9/15	A. Nagar Stand	BUS	120 km	149/-	149/-
12/9/15	Nagar Stand	10.35 pm	12/9/15	Home	Auto	3 km	40/-	40/-

Add :- 1) Daily Allowance at ordinary rate at Rs. 180/- per day for 7 days i. e. for _____ hours _____ days i. e. for _____ hours _____ days i. e. for _____ hours
 absence from the place of Head Quarter. 498
180 DA +180 DA 678/-

2) Difference between D.A. at or dinaary and special rate at Rs. _____ per day for _____ halt at _____ per day for _____ halt at _____ special place. 678/-

Total claim Rs. 678/- Signature: [Signature] CA. K. Nangare

PDVVPF's College of Pharmacy - (From 1-Apr-2013)

Cash Payment Voucher

No. : 615

Dated : 6-Jan-2016

Particulars	Amount
Account :	
Travelling Exps-Staff	
	160.00
Through :	
Cash	
On Account of :	
Being amount paid to Prof.Hapse S.A. against trvelling exp. as per sanction.	
Amount (in words) :	
Indian Rupees One Hundred Sixty Only	
	Rs. 160.00

M. Chavva



RECEIPT

Date : 6/1 /2016

Received with thanks from Padmashree Dr.Vithalrao Vikhe Patil Foundation's
College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

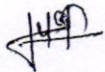
In cash/By Cheque/D.D.No.....Dated / /2016

Drawn on

Bill no.....Dated / /2016

On Account of

Rs. 100/-

Sign : 
Name : S.A.Hopse

Padmashree Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

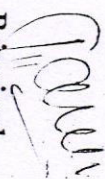
Ref. No. Coph/Esstt./2016/ 25

Date : 02/01/2016.

:: OFFICE ORDER ::

Prof. A.P. Deshpande (Asso. Professor) & Shri. S.A. Hapse (Asstt. Prof.) are deputed to Rahuri, on 4th January, 2016, for official work, (To attend meeting regarding convocation ceremony at Institute level), at Arts Commerce & Science College, Rahuri, Tal. Rahuri, Dist. Ahmednagar.

They are entitled for T.A. & D.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to :

- 1) Prof. A.P. Deshpande
- 2) Prof. S.A. Hapse
- 3) Esstt. Section
- 4) A/c. Section.

Padmashri Dr. Vitthalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHMEDNAGAR
TRAVELLING ALLOWANCE BILL


1) Name and Designation : Prof. S.A. Hapse Asst. Professor Date: 05/01/2016
 2) Basic Pay Rs : 1800/-
 3) Purpose of journey and order No. Meeting of Connection Ceremony

From			To			Mode of conveyance i.e. by Rail/S, T, / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
1									
4/1/15	Nagpur	8:20 am	4/1/15	Rahuri	9:30 am	Private	40 km	50/-	50/-
4/1/15	Rahuri BST	9:45 am	4/1/15	Rahuri college	10:15 am	Private	10 km	30/-	30/-
4/1/15	Rahuri college	5:00 pm	4/1/15	Rahuri BST	5:30 pm	Private	10 km	30/-	30/-
4/1/15	Rahuri BST	6:20 pm	4/1/15	Nagpur BST	7:30 pm	Private	40 km	50/-	50/-
									180/-

Add :- 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. e. for _____ hours
 absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at special place.

Total claim Rs. 180/-

Signature 

CERTIFICATE

Certified that —

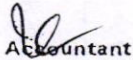
- 1 I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled,
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs.) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6 I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____



Signature of the claimant


I have checked the T. A Bill of shri _____

The amount claimed by him may please
be passed for payment for Rs. 160/-



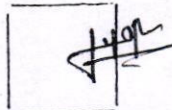
Accountant

Approved and passed for payment of Rs. 160/-



Principal

Received the amount of Rs. 160/-



Stamp & Signature of the
claimant

PDVVPF's College of Pharmacy - (From 1-Apr-2013)

Cash Payment Voucher

No. : 645

Dated : 18-Jan-2016

Particulars	Amount
Account :	
Travelling Exps-Staff	220.00
Seminar Exps	300.00
Through :	
Cash	
On Account of :	
Being amount paid to kakad S.B. against travelling exp. as per bill & sanction.	
Amount (in words) :	
Indian Rupees Five Hundred Twenty Only	
	Rs. 520.00

Receiver's Signature:

Checked by

Authorised Signatory

Verified by

RECEIPT

Date: 18/1 /2016

Received with thanks from Principal, Padmashree Dr.Vithalrao Vikhe
Patil Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees five hundred twenty only

~~In cash~~/By Cheque/D.D.No.....Dated / / 2016

Drawn on

Bill no.....Dated / /2016

On Account of

Rs. 520/-

Sign: [Signature]

Name: prf. S.B. Kokced

13/1/16
(Wed.)

प्रति,
सा. प्राचार्य,
विठ्ठलराव विखे पालीत कॉलेज ऑफ कार्मसी,
विठ्ठल हाट, अ.नगर.

विषय :- Registration fees मिलणेबाबत.

अर्जदार :- प्रा. काकड सुदर्शन
(DEPT. OF P'chemistry)

महोदय,

करीब विषयान्वये कारणेविनंती अर्ज करतो
की, श्री दि. 12 व 13 जाने. 2016 शेजी आतासाहेब काकडे
कॉलेज ऑफ कार्मसी, बोरोगाव रोड, state Level seminar
करिता गेलो होतो. सदर ताबतची Reg. Fees Rs. 300/-
मला मिळावी ही नस्र विनंती.
(*सोबत पावती जोडली आहे)

आपला विश्वासु.
Bud.
(Prof. S. B. Kakad)

Alc
Sanctioned Rs. 300/-
(Kakad)
13/1/2016

Padmashree Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

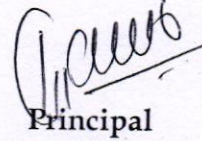
Ref. No. Coph/Esstt./2016/88

Date : 13/01/2016.

:: OFFICE ORDER ::

Shri. S.B. Kakad (Asstt. Professor) was deputed to Shevgaon, on 12th January, 2016, for official work, regarding to attend one day state level seminar, at Abasaheb Kakade College of Pharmacy, Bodhegaon, Tal. Shevgaon, Dist. Ahmednagar.

He is entitled for T.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Shri. S.B. Kakad

2) Esstt. Section

3) A/c. Section.



Savitribai Phule Pune University Sponsored State Level Seminar on
" **Current Pharmacy Practices and
Innovation in Pharmaceutical Technologies** "
(CPPPT-2016) 12th & 13th January 2016
Organized by :- Navmaharashtra Shikshan Mandal's
Abasaheb Kakade college of B.Pharmacy
Bodhegaon, Tal. Shevgaon, Dist. Ahmednagar.

No. **0015**

Date

Received with thanks from Dr./Mr./Ms./Mss. Kataad Suedanshaw Rs.

Rupees (In words) Three thousand.

By Cash/ Cheque/ D/d. No. _____ Date 12/11/16.

Bank _____ as seminar registration fees.



3501-

Kataad
Receiptant Sign.

Padmashri Dr. Vitthalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

1) Name and Designation : Prof. S.B. Kakad

2) Basic Pay Rs : 15,100/-

Date : 14/01/2016

Asst. Prof.

3) Purpose of journey and order No. Attending state level seminar

Coph / Estt. / 2016 / 88

From			To			Mode of conveyance i.e., by Rail/S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
12.01.2016	A. nagar	7:30 AM	12.01.16	Bodhgad	10:15 AM	<u>own conveyance</u> Bus	108 km	108 x 2.5	270 = 00 1161 -
12.01.2016	Bodhgad	5:00 PM	12.01.16	A. nagar	7:30 PM	own conveyance	108 km	108 x 2.5	270 = 00 1191 -

Add :- 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. e. for _____ hours

+ 00

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at

special place.

220

Total claim Rs. 540

Signature

[Signature]

540/-

D1

CERTIFICATE

Certified that —

- 1 I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled,
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs.) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6 I have travelled for the specific work of the Institution and have completed the work for which I was sent to Kakade college of pharmacy, Badhegaon.

Bud.
Signature of the claimant

I have checked the T. A Bill of shri Kakad S. B.

The amount claimed by him may please be passed for payment for Rs. 90/4 540 = 00
220 = 00

[Signature]
Accountant

Approved and passed for payment of Rs. 540 = 00 220/-

[Signature]
Principal

Received the amount of Rs. 540 = 00 220/-

[Signature]
Stamp & Signature of the claimant



Savitribai Phule Pune University Sponsored State Level Seminar on

“Current Pharmacy Practices and

Innovation in Pharmaceutical Technology”

(CPPIPT-2016) 12th & 13th January 2016

Organized by

Navmaharashtra Shikshan Mandal's



Abasaheb Kakade college of B.Pharmacy

Bodhegaon, Tal. Shevgaon, Dist. Ahmednagar.

Certificate

Kakad Sudarshan.

This is to certified that Prof. /Dr. /Mr. /Mrs. /Ms..... has participated in Savitribai Phule Pune University Sponsored State Level Seminar on “Current Pharmacy Practices and Innovation in Pharmaceutical Technology” (CPPIPT-2016) held on 12th & 13th January 2016 as resource person / delegate / member of organizing committee. His / Her active participation in the seminar is immensely appreciated.

Asst. Prof. V. B. Gawali
Programme Co-ordinator

Dr. S. R. Pattan
Principal & Convener

Savitribai Phule Pune University

Sponsored

Resource Person's

Patrons

Dr.Sawant R.L.

PDVVPPS College of Pharmacy,Vlad Chat, Anagar

Dr.Bhand D.V.

CSIR-National Chemical Laboratory,Pune

Dr.Lahoti S.R.

Y.B.Chavan College of Pharmacy,Aurangabad

Dr.Bochare M.D.

Institute of Chemical Technology,Mumbai

Dr:Sangshetti J.N.

Y.B.Chavan College of Pharmacy, Aurangabad

Dr.Mahale N.B.

Amrutvahini College of Pharmacy,Sangamner

State level Seminar

ON

Current Pharmacy Practices & Innovation in Pharmaceutical Technology

(CPPIPT-2016)

12th & 13th January 2016

Adv. Vidvadhari J. Kakade
Secretary,NMSM Shevgaon.

Sau.Harshadatal V. Kakade
Z.P. Member, Ahmednagar.

Mr. Shivnath B. Devdhe
President NMSM Shevgaon.

Mr. Dignbar S. Markad
Co-Ordinator
Pharmacy Campus, Bodhegaon.



Local Organising Committee

Convenor

Asst. Prof. Bhalsing M. D.

9975759935

Asst. Prof. Magar S. D.

9503047276

Registration committee

Asst. Prof. Davkhar S.S

9922629493

Asst. Prof. Dalavi N. B.

9665643234

Asst. Prof. Thange S.R

9665643234

Asst. Prof. Joshi T.V.

9673926392

Accommodation committee

Organised by



Navmaharashtra Shikshan Mandal's

Abasahab Kakade

college of B. Pharmacy,

Bodhegaon Tq. Shevgaon Dist- A. Nagar

Telephone (02429) 240295

Email- kakadebpharmacy@gmail.com

kakadeseminar@gmail.com

Programme Director

Dr. S. R. Pattan

Principal & Professor

Abasahab Kakade college of B.Pharmacy, Bodhegaon.

E - mail - kakadebpharmacy@gmail.com

Call +919553002333

Programme Co-Ordinator

Asst.Prof. V. B. Gawali

Director

Abasahab Kakade college of B.Pharmacy, Bodhegaon

E - mail - vikasgawali07@gmail.com

kakadeseminar@gmail.com

Call +918378992997

AKCOB Pharmacy, Bodhegaon

AKCOB Pharmacy, Bodhegaon

AKCOB Pharmacy, Bodhegaon

PDVVPF's College of Pharmacy - (From 1-Apr-2013)

Cash Payment Voucher

No. : 53

Dated : 22-Apr-2016

Particulars	Amount
-------------	--------

Account :
Seminar Exps

1,500.00

Rs. 1,500.00

Through :

Cash

On Account of :

Being amount paid to godge g r against regi.fees as per receipt & sanction.

Amount (in words) :

Indian Rupees One Thousand Five Hundred Only

Receiver's Signature:

Checked by

Authorised Signatory

Verified by

RECEIPT

Date : 22/5/2016

Received with thanks from Principal, Padmashree Dr. Vithalrao Vikhe
Patil Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2016

Drawn on

Bill no.....Dated / / 2016

On Account of

Rs. 1500/-

Sign :

Name :



(G. R. Gode)

Date 21-02-16

- 89

To,
The Principal
COP, A'Nagar

Sub. :- About Sanction of Reg. Fees for
FDP at NMIMS, Shirpur

● Respected Sir,

With reference to above mentioned subject, i was deputed to participate in 1 week FDP at NMIMS, Shirpur. To participate in the same i have paid Rs. 1500/- as reg. fees.

So please give me permission to re-emburse the same. (Receipt is attached)

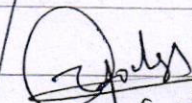
Kindly do the needful

● Thanking you,

ATC

Sanctioned Rs. 1500/-

22/2/16


Yours faithfully
G. R. Gadge



ISTE Approved

FACULTY DEVELOPMENT PROGRAMME - 2016



Sr. No.: -----

REGISTRATION FEES RECEIPT

Date: 11/04/2016

Received with thanks from Mr. G. R. Godge Rupees 1500/- by Cash/Cheque/Bank

Transfer/DD No. ----- Dt. / / 2016 Drawn on ----- towards registration

charges for "ISTE Approved 01 Week Faculty Development Programme' 2016" on Recent Advances in Pharmaceutical Sciences to be held during April 11 To 15, 2016.

[Receivers Name & Signature]

School of Pharmacy & Technology Management (SPTM), Shirpur Campus



Cash Payment Voucher

No. : 68

Dated : 28-Apr-2016

Particulars	Amount
Account :	
Travelling Exps-Staff	443.00
Seminar Exps	250.00
Through :	
Cash	
On Account of :	
Being amount paid to Mane B.Y. against travelling exp. as per sanction.	
Amount (in words) :	
Indian Rupees Six Hundred Ninety Three Only	
	Rs. 693.00

Receiver's Signature:

B
Checked by

[Signature]
Authorised Signatory

[Signature]
Verified by

RECEIPT

Date : 28/6 /2016

Received with thanks from Principal, Padmashree Dr. Vithalrao Vikhe

Patil Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees ₹ 57 hundred ninety three only

In cash/By Cheque/D.D.No. Dated / / 2016

Drawn on

Bill no. Dated / / 2016

On Account of

Rs. 693/-

Sign : Pratima

Name : Dr B. Y. Mane

To:
Principal
PDWPF's College of Pharmacy
Vilad Bhat A-Nagar.

from: Dr. Balasubh Y. Mane

Sub: Allow to issue the registration fee &
TADA bill for attended conference
at kashiti.

Respected Sir,

I attended the two days national
conference held at college of pharmacy
kashiti. along with students from our college.

20/04/2016
for the same registration fee was Rs-250/-

Please allow me to issue the registration
fee and TADA bill.

Thanking you.

AIC
sanctioned

Yours sincerely,
Balasubh

Rs. 250/-
(AIC)



Hon. Shri Babanrao Pachpute Vichardhara Trust's, Group of Institutions,
College of Pharmacy, Kashti.

RECEIPT

DATE: 4/2/16

Received with thanks from Dr/Mr/Mrs/MS. Balasaheb Y. mane

Is registered to Pune University Sponsored, Two days National Conference and has paid sum of

Rs. 250 (In words) two fifty Only by Cash/D.D No. _____ Date _____

Bank _____ hurd

Pradamb
Signature of Delegate



Z. B. Chavhan
Name & Signature of Receiver



Certificate



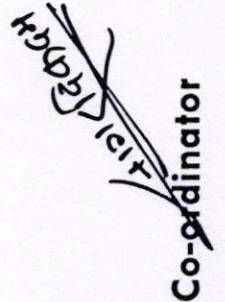
Savitribai Phule Pune
University, Pune

This is certified that, Prof./Dr./Mr./Ms. Balasaheb Y. Mane
of PDWPF's COP A. Nagar has attended / presented a Research Paper entitled _____
_____ or has been Speaker / Reviewer

in the Scientific Sessions of A Two Days National Conference On "Innovations in Teaching & Research
in Pharmaceutical Sciences" held at H.S.B.P.V.T's, G.O.I.s. College of Pharmacy, Kashti, Ahmednagar,
Maharashtra, during 4th to 5th February-2016

2.2.16

Convenor


Co-ordinator


Organizing Secretary

PADMASHRE E DR. VITHALRAO VIKHE PATIL FOUNDATIONS

COLLEGE OF PHARMACY

VILAD GHAT, AHMEDNAGAR

Ref.No. Coph /Esstt./2016/ 494

Date: 12/04/2016

:: OFFICE ORDER ::

Dr. B.Y. Mane (Asstt. Prof.) & Prof. N.S. Mhaske (Asstt. Prof.) are deputed to Pune on 13/04/2016 for M. Pharmacy Admission Process.

They are entitled for T.A. & D.A. as per rule.

(Signature)

Principal

College of Pharmacy,
Ahmednagar

Copy to: 1) Dr. B.Y. Mane 2) Prof. N.S. Mhaske 3) A/c 4) Esstt. Section

Padmashri Dr. Vitthalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

1) Name and Designation: Dr. Balasahel Mane

Asst. Professor

2) Basic Pay Rs: 25600/-

Date 24/3/2026

3) Purpose of journey and order No. M.Pharm. Admin. Program Pune. (494)

Date	From		To			Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure	Date	Place	Time of arrival				
13.4.16.	A. Nagar	6:50 am	13.4.16	Shirur	8:30 am	own vehicle	55 km	90/-	90/-
13.4.16.	Shirur	10:00 am	13.4.16	Shirur	11:00 am	—	27 km	44/-	44/-
13.4.16.	Shirur	12:30 pm	13.4.16	Waghodi	1:30 pm	—	27 km	44/-	44/-
13.4.16.	Waghodi	4:00 pm	13.4.16	A. Nagar	6:30 pm	—	106 km	125/-	125/-

Add :- 1) Daily Allowance at ordinary rate at Rs. 140/- per day for — days i. o. for — hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. — per day for — days at — special place.

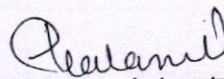
Total claim Rs. 494/-

Signature Balasahel

CERTIFICATE

Certified that —

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled,
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6) I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____

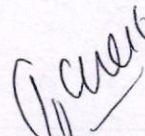

Signature of the claimant

I have checked the T. A Bill of shri _____

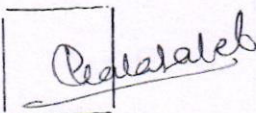
_____ The amount claimed by him may please
be passed for payment to Rs. 4431/-


Accountant

Approved and passed for payment of Rs. 4431/-


Principal

Received the amount of Rs. 4431/-


Stamp & Signature of the
claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar


Cash Payment Voucher

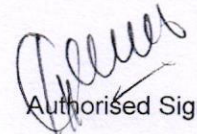
No. : 745

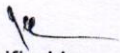
Dated : 19-Mar-2017

Particulars	Amount
Account : Travelling Exps - Staff	490.00
Through : Cash	
On Account of : Being Amount Paid To Gaikwad D.A Against Pune For Attending NSS & Student Wekfaire Pre -Audit Meeting.As Per T.A DA & Office Order Atta-ched.	
Amount (in words) : Indian Rupees Four Hundred Ninety Only	
	Rs. 490.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 10/3/2017

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees Two hundred ninety only

In cash/By Cheque/D.D.No. cash Dated 10/3 / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of T.A.

Rs. 290/-

Sign :

Name :

[Signature]
Gailwan W.A

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

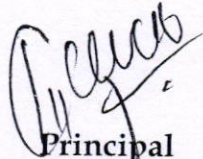
Ref. No. Coph/Esstt./2017/ 216

Date : 06/03/2017.

:: OFFICE ORDER ::

Shri. A.K. Nangare (Asstt. Professor) & Shri. D.A. Gaikwad (Jr. Clerk A/c section) are deputed to Pune, on 9th March, 2017, for official work, regarding to attend NSS & Students Welfare pre-audit Meeting, at Shikshan Prasarak Mandal's S.P. College, Tilak Road, Pune-30.

They are entitled for T.A. & D.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to :

- 1) Shri. A.K. Nangare 2) Shri. D.A. Gaikwad 3) Esstt. Section 4) A/c. Section.

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Employee Designation: Quilswal Deepak Date: 10/13/2017
Ashok Jr. Clerk
 2) Basic Pay Rs: _____
 3) Purpose of journey and order No. To Attend Pre-audit meeting
At S.P. College Pune.

Date	From		To		Mode of conveyance i.e. by Rail/S,T, Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed	
	Place	Time of departure	Date	Place					Time of arrival
1 9/12/2017	Savadi	6:30 am	9/13/14	A' Nagar stand	7	8	9	10	
2	A' Nagar	7:15	9/13/14	Pune	Rikshaw	10	20/-	20/-	
3	Pune	10:50	9/13/14	S.P. College	Private Bus	120	130/-	130/-	
4	S.P. College	4:55	9/13/14	Tilak Road Pune stand	Rikshaw	09	30/-	30/-	
5	Pune	5:45	9/13/14	A' Nagar	Private Bus	09	30/-	30/-	
6	A' Nagar	5:50	9/14	Savadi	Private Bus	120	130/-	130/-	
					Rikshaw	10	25/-	25/-	
								<u>365/-</u>	
								<u>125/-</u>	
								<u>490/-</u>	

1) Daily Allowance at ordinary rate at Rs. 125/- per day for _____ days i. o. for _____ hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hours at special place.

Total claim Rs. 490/-

D.A.

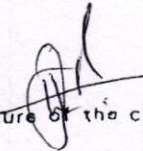
Signature



CERTIFICATE

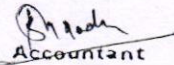
Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the claimed amount in the bill
- 4. I have not taken any advance (of Rs.) for this journey
- 5. If there is any audit objection and if there is recovery I am ready to refund the same
- 6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____

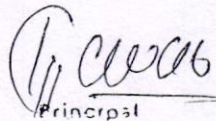

Signature of the claimant

I have checked the T. A. Bill of shri Gajawadee Deepale Ashok

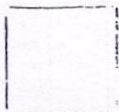
The amount claimed by him may please be passed for payment to Rs. 490/-


Accountant

Approved and passed for payment of Rs. 490/-


Principal

Received the amount of Rs. 490/-


Stamp & Signature of the claimant

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

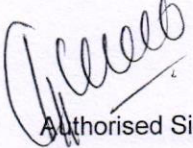
Cash Payment Voucher

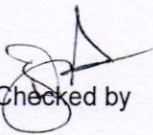
No. : 620


Dated : 30-Jan-2017

Particulars	Amount
Account : Travelling Exps - Staff	790.00
Through : Cash	
On Account of : Being Amount Paid To Ambekar A.W Against T.A & D.A For Syllabus Revision Workshop At Nashik.	
Amount (in words) : Indian Rupees Seven Hundred Ninety Only	
	Rs. 790.00

Receiver's Signature:


Authorised Signatory


Checked by


Verified by

RECEIPT

Date : 30/1 /2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees Seven Hundred Ninety only

In cash/By Cheque/D.D.No..... Cash.....Dated 30/01 / 2017

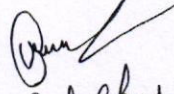
Drawn on

Bill no.....Dated / /2017

On Account of Travelling Expenses

Rs. 790/-

Sign :



Name :

Ambekar M. W.

म.रा.भा.प.अ
रा. प. तारकपुर आगार
क्र: ००१००९ २७/०१/१७ ०६:५९:३०
निम्नआगार वस १४२१३ २:१५:५१

तारकपुर नासिक ते

(पचासाचे पुरेण टाणे = ३९) ५३०३८

कुल: १ X ३४९.०० = ₹ ३४९.००

अ. स निधी: १४९.०० = ₹ १.००

₹ ३४०.००

TKPR१७० ०११२६६ R A Falak
अस्त्यांतरणीय ००३१९०१४२३

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

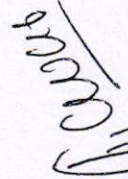
Date : 25/01/2017.

Ref. No. Coph/Esstt./2017/96

:: OFFICE ORDER ::

Shri. A.W. Ambekar (Asstt. Professor) is deputed to Nashik, on 27th January, 2017,
for official work, regarding to attend Pharmaceutics syllabus review meeting - T.Y.B.Pharm.,
at Sapkal College of Pharmacy, Nashik.

He is entitled for T.A. & D.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

3) A/c. Section.

2) Esstt. Section

Copy to:
Shri A.W. Ambekar



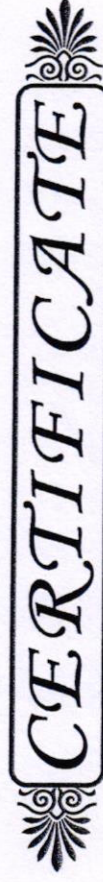
In association with

Kalyani Charitable Trust's

Ravindra Gambhirrao Sapakal College of Pharmacy

Anjaneri, Nashik.

SYLLABUS REVISION WORKSHOP ON PHARMACEUTICS



This is to certify that Dr./ Mr./ Mrs./ Miss. Ambekar A.W
Dr.N.V.P.F College of Pharmacy, A'Nager has participated in syllabus revision
workshop, Board of studies - Pharmaceuticals (Third year and Final
year B. Pharmacy) on 27th Jan. 2017. We duly acknowledge his/her
contribution.

Prof. Dr. M. P. Wagh
Co-ordinator
BOS - Pharmaceuticals

Prof. Dr. R. B. Saudagar
Principal
RGSCOP, Nashik.

Prof. Dr. C. D. Upasani
Dean Co-ordinator
Pharmaceutical Sciences. SPPU, Pune



Padmashri Dr. Vitthalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Designation Ambeba Abdul Malik

2) Basic Pay Rs: 26,900

Date 30/01/2017

Asst. Professor

3) Purpose of journey and order No. Agilabes Review Meeting

From			To			Mode of conveyance i.e. by Rail/S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
27/1/17	Home	5:45 A.m	27/1/17	CBS Nagoa	6:05 A.m	06	25	25	
27/1/17	CBS, Nagoa	6:15 A.m	27/1/17	Modkik	10:15 A.m	170	250	250	
27/1/17	CBS, Modkik	10:20 A.m	27/1/17	Kopad cop	10:50 A.m	20	50	50	
27/1/17	Kopad cop	5:30 P.m	27/1/17	CBS Modkik	6:00 P.m	20	50	50	
27/1/17	CBS Modkik	6:30 P.m	27/1/17	CBS, Nagoa	10:30 P.m	170	250	250	
27/1/17	CBS, Nagoa	10:35 P.m	27/1/17	Home	11:00 P.m	06	25	25	

Add - 1) Daily Allowance at ordinary rate at Rs. 150 per day for 1 days i. o. for 1 hours 150

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hall at _____ special place.

Total claim Rs. 790

Signature [Signature]



CERTIFICATE

Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the estimated amount in the bill
- 4. I have not taken any advance (or) for my journey
- 5. If there is any audit objection and if there is recovery on my party to refund the same
- 6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to

Signature of the claimant

One Side Ticket not Recd, Pat. Udaipur.

[Handwritten Signature]

I have checked the T. A Bill of shri

The amount claimed by him may please be passed for payment to Rs. 790/-

[Handwritten Signature]
Accountant

Approved and passed for payment of Rs. 790/-

[Handwritten Signature]
Principal

Received the amount of Rs. 790/-

[Handwritten Signature]

Stamp & Signature of the claimant

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

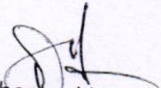
Cash Payment Voucher

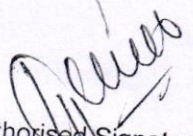
No. : 796


Dated : 31-Mar-2017

Particulars	Amount
Account : Seminar Exps	1,400.00
Through : Cash	
On Account of : Being Amount Paid To Wadekar J.B Against Registration Fee As Per Receipt & Sanction Attached.	
Amount (in words) : Indian Rupees One Thousand Four Hundred Only	
	Rs. 1,400.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 31/3/2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees one Thousand Four Hundred only

In cash/By Cheque/D.D.No. cash Dated / / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of Seminar Exp

Rs. 1400/-

Sign:



Name: Jyoti B. Wadekar

Date : 21.3.2017

No. 73

To,
The Principal,
Dr. V.V. Patil Foundation's
College of Pharmacy,
Ahmednagar

~~Mc~~
Sanctioned Rs. 1400/-
JCB/UB
21/3/2017

Sub: Refund of registration fees

Respected Sir,

I Prof. Jyoti B. Wadekar has attended
Two days national conference on 'Exploring
Herbal Domain: Past, Present & Future of India
Global Map [21st National Convention Society
of Pharmacognosy] on 16th & 17th March 2017,
at Govt. College of Pharmacy, Aurangabad.

The Registration fees for the same was
Rs. 1400/- . So I kindly request you to
refund the same.

Thanking You,

Yours Faithfully

Enclosed:

Receipt of registration fees.

(J.B. Wadekar)

Two days National Conference On
21st National Convention of Society of Pharmacognosy conference on
"Exploration of Herbal domain: Past, Present and Future of India on global map".

RECEIPT OF PAYMENT

Cash Receipt No : 216

Date : 16/03/2017

Received from Ms. Jyoti Wadekar

the sum of Rs. forteen Hundred only /- (in words)

Rs. 1400 /- (DD/Cash/Cheque/NEFT) on account of Registration

/ Sponsorship /

Payment Details: Reg. No. :- 265

Amount:

DD/Cheque/NEFT Number:

Bank and Branch:



[Signature]

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

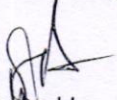
Cash Payment Voucher

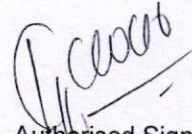
No. : 593


Dated : 17-Jan-2017

Particulars	Amount
Account :	
Travelling Exps - Staff	332.00
Seminar Exps	300.00
Through :	
Cash	
On Account of :	
Being Amount Paid To Prof.Raskar M.A Against Seminar At Kopergaon As Per T.A D.A & Receipt Attached.	
Amount (in words) :	
Indian Rupees Six Hundred Thirty Two Only	
	Rs. 632.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date : 17/1/2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees Six Hundred Thirty Two only

In cash/By Cheque/D.D.No. cash Dated 17/1/2017

Drawn on

Bill no.....Dated / /2017

On Account of J.A.S.A.

Rs. 632/-

Sign : M.A. Raskar

Name : M.A. Raskar

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

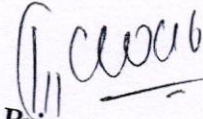
Ref. No. Coph/Esstt./2017/ 50

Date : 13/01/2017.

:: OFFICE ORDER ::

Shri. M.A. Raskar (Asstt. Professor) was deputed to Sangamner, on 10th & 11th January, 2017, for official work, regarding to attend two days national level seminar, at Sanjivani College of Pharmaceutical Education & Research, Kopargaon, Dist. Ahmednagar.

He is entitled for T.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Shri. M.A. Raskar

2) Esstt. Section

3) A/c. Section.

दि. 02/09/96

प्रति
भा. प्राचार्य
बोधनिर्माण महाविद्यालय,
अहमदनगर

विषय - खास मंजूरी मिळणे बाबत

भा. महोदय, वरील विषयान अनुसरून, माझे करतो
की, दि. 09-09-2014 व 09-09-2014 रोजी (DUPER,
Kopergaon) कॉपीतनी कॉलेज ऑफ कॉमर्स
कोपरगाव येथे 2 दिवसांच्या कार्यशाळेमध्ये
मात्र होतला होता. सदरचे रजि.
कि संदर्भात पातळी जोडत आहे. (Registration Fee
तरी विरम खास मंजूरी मिळत ही विम

Registration Fee = Rs 300/-

आपला विश्वासू

Forwarded
PRT

Sanctioned (Prof. M. A. Raskar)
Rs 300/-
11/09/96
13/11/96

Sanjivani Rural Education Society's
**Sanjivani College of Pharmaceutical Education
and Research, Kopargaon**

Tal : Kopargaon Dist: Ahmednagar
BCUD, SPPU Sponsored Two Days National Level Seminar On

**CURRENT TRENDS IN
QUALITY ASSURANCE TECHNIQUES**

No. :

132

Date : 10 / 1 / 2017

Name :

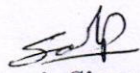
Manish Ashok Raskar.

Sr. No.	Particulars	Amount (Rs.)
1.	Registration Fee	300/-
Total :-		300/-

Received (In words) Rs. Three hundred only

_____ in cash.

Payer's Signature


Receiver's Signature

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHEMDNAGAR

TRAVELLING ALLOWANCE BILL

Name and Designation: M. A. Raskar
(Asst. Prof)

2) Basic Pay Rs: 25600/-

Date: 12/01/2017

3) Purpose of journey and order No. To attend seminar at SC PER, Kopergaon

Date	From		To		Mode of conveyance i.e. by Rail / S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed	
	Date	Time of departure	Place	Place					
10-01-17	6:30am	A'Nagar	10-01-17	Kopergaon	S.T.	120km	116/-	116/-	
11-01-17	5:30pm	Kopergaon	11-01-17	A'Nagar	S.T.	120km	116/-	116/-	
					LCA =	50x2	=	100	
							Total Rs.	332/-	

Add. - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours absence from the place of Head Quarter.

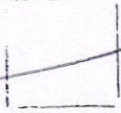
2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hours at special place.

Total claim Rs. _____

MAR
Signature



Stamp & Signature of the claimant



Received the amount of Rs. _____

Principal
[Handwritten Signature]

Approved and passed for payment of Rs. _____

Accountant
[Handwritten Signature]

_____ be passed for payment to Rs. _____

_____ The amount claimed by him may please

_____ I have checked the T. A Bill of shri _____

Signature of the claimant

[Handwritten Signature]

6 I have travelled for the specific work of the institution and have completed the work for which I was sent to _____

5) If there is any audit objection and if there is recovery _____ and carry to refund the same

4) I have not taken any advance _____ for my journey

3) The actual expenditure incurred by me is not less than _____ stated amount in the bill

2) By the class / mode of conveyance for which I am entitled.

1 I have travelled by the shortest route

Certified that -

CERTIFICATE

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar


Cash Payment Voucher

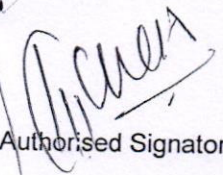
No. : 679

Dated : 15-Feb-2017

Particulars	Amount
Account : Travelling Exps - Staff	640.00
Through : Cash	
On Account of : Being Amount Paid To Prof.Mrs.Joshi R.A Against T.A D.A For Nashik MET College As Per Bill & Office Order Attached.	
Amount (in words) : Indian Rupees Six Hundred Forty Only	
	Rs. 640.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 15/2/2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees Six Hundred Forty only

In cash/By Cheque/D.D.No. cashDated 15/2/2017

Drawn on

Bill no.....Dated / /2017

On Account of Treasury Exp

Rs. 640/-

Sign:

Name:

BSH
Mrs RSIoshi

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

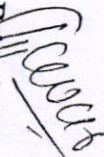
Ref. No. Coph/Esstt./2017/ 116

Date : 01/02/2017.

:: OFFICE ORDER ::

Prof. Mrs. R.S. Joshi & Prof. Mrs. M.K. Tarkase (Asstt. Professor) were deputed to Nashik, on 16th January, 2017, for official work, regarding to attend Pharmacy Chemistry syllabus review meeting, at MET Bhujbal Knowledge City, MET's Institute of Pharmacy, Nashik.

They are entitled for T.A. & D.A. as per rule.


Principal

College of Pharmacy,
Ahmednagar.

~~Copy to:~~

1) Mrs. R.S. Joshi 2) Mrs. M.K. Tarkase

3) Esstt. Section

4) A/c. Section.

Padmashri Dr. Vitthalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Authorizing Designation: Toshi Rupali S.
Asst. Professor.

2) Basic Pay Rs: _____
 3) Purpose of journey and order No. Coph/ESH/2017/110 dated 01/02/17

Date: 7/2/2017

Date	From		To		Mode of conveyance i.e. by Rail/S.T / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure	Place	Time of arrival				
16/11/2017	Ahmednagar	5.00 AM	Nasik	9.15 AM	Private vehical	190	250	
16/11/2017	Nasik Stand	9.30 AM	MET college	10.00	Auto	15	50	
16/11/17	Nasik	6.00 PM	Ahmednagar	10.00 PM	Private vehical	190	250	

Add - 1) Daily Allowance at ordinary rate at Rs. 140 per day for 2 days i. o. for 2 hours 60 absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hall at _____

Total claim Rs. 640

Signature: [Signature]



CERTIFICATE

Certified that -

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than the claimed amount in the bill
- 4) I have not taken any advance (of Rs.) for the journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6) I have travelled for the specific work of the Institution and have completed the work for which I was sent to Nasik

[Handwritten Signature]

Signature of the claimant

I have checked the T. A Bill of shri Joshi R.S.

The amount claimed by him may please be passed for payment to Rs. 600/-

[Handwritten Signature]
Accountant

Approved and passed for payment of Rs. 600/-

[Handwritten Signature]
Principal

Received the amount of Rs. 600/-

[Handwritten Signature]

Stamp & Signature of the claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

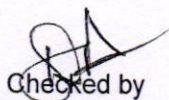
Cash Payment Voucher


No. : 680


Dated : 15-Feb-2017

Particulars	Amount
Account : Travelling Exps - Staff	640.00
Through : Cash	
On Account of : Being Amount Paid To Prof.Mrs.Tarkase M.K Against T.A D.A For Nashik MET College As Per Bill & Office Order Attached.	
Amount (in words) : Indian Rupees Six Hundred Forty Only	
	Rs. 640.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 15/2 /2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees Six Hundred Rupees only.....

In cash/By Cheque/D.D.No. Cash.....Dated 15/2 /2017

Drawn on

Bill no.....Dated / /2017

On Account of Training Exp

Rs. 640/-

Sign :

Muhmm

Name :

M.K. Tarikase

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

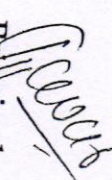
Ref. No. Coph/Esstt./2017/ 116

Date : 01/02/2017.

:: OFFICE ORDER ::

Prof. Mrs. R.S. Joshi & Prof. Mrs. M.K. Tarkase (Asstt. Professor) were deputed to Nashik, on 16th January, 2017, for official work, regarding to attend Pharmaceutical Chemistry syllabus review meeting, at MET Bhujbal Knowledge City, MET's Institute of Pharmacy, Nashik.

They are entitled for T.A. & D.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

~~Copy to:~~

- 1) Mrs. R.S. Joshi 2) Mrs. M.K. Tarkase 3) Esstt. Section 4) A/c. Section.

Padmashri Dr. Vilhalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR TRAVELLING ALLOWANCE BILL

Designation: TRIPURASE MADHURATHI K

Asst. Prof.

2) Basic Pay Rs: 25050/-

Date: 7/2/2017

3) Purpose of journey and order No. COPT/ES/27-12017/110 dated 01/2/2017

From			To			Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
16/1/2017	Pinayod	5.00 am	16/1/17	Mashik	9.15 am	Private vehicle	190	250	
16/1/2017	Mashik stand	9.30 am		Mashik college	10.00	Auto	15	50	
16/1/17	Mashik college	5.30 pm		Mashik stand	6.00	Auto	15	50	
16/1/17	Mashik	6.00 pm	16/1/17	Pinayod	10.00 pm	Private vehicle	190	250	

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. e. for _____ hours

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hours

Total claim Rs. _____

Signature [Signature]



CERTIFICATE

Certified that -

1. I have travelled by the shortest route
2. By the class / mode of conveyance for which I am entitled
3. The actual expenditure incurred by me is not less than the claimed amount in the bill
4. I have not taken any advance of Rs. for my journey
5. If there is any audit objection and if there is recovery and ready to refund the same
6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to Nashik

M. C. Carvekar

Signature of the claimant

I have checked the T. A. Bill of shri Tarkuse. M. S.

The amount claimed by him may please be passed for payment to Rs. 640/-

Anand
Accountant

Approved and passed for payment of Rs. 640/-

M. C. Carvekar
Principal

Received the amount of Rs. 640/-

M. C. Carvekar

Stamp & Signature of the claimant

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

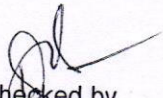
Cash Payment Voucher

No. : 657


Dated : 7-Feb-2017

Particulars	Amount
Account :	
Travelling Exps - Staff	260.00
Seminar Exps	300.00
Through :	
Cash	
On Account of :	
Being Amount Paid To Hapse S.A Against T.A & Seminar Registration Fee.	
Amount (in words) :	
Indian Rupees Five Hundred Sixty Only	
	Rs. 560.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date : /2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

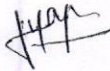
In cash/By Cheque/D.D.No.....Dated / / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of

Rs. 560/-

Sign: 

Name: SA Hapse

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

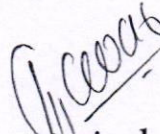
Ref. No. Coph/Esstt./2017/119

Date : 06/02/2017.

:: OFFICE ORDER ::

Shri. S.A.Hapse (Asstt. Professor) was deputed to Sonai, on 3rd & 4th February, 2017, for official work, regarding to attend two days National Level Conference, at MES's College of Pharmacy, Sonai, Tal. Newasa, Dist. Ahmednagar.

He is entitled for T.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Shri. S.A.Hapse

2) Esstt. Section

3) A/c. Section.

College of Pharmacy, Sonai
Tal. Newasa, Dist. Ahmednagar, Ms. 414105

RECEIPT

No. **95**

Date **3/2/2017**

Received with thanks from Dr. / Mr. / Mrs. / Miss. **Hanse**

5.A

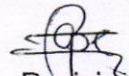
College / Organization **Dr. V.V.P. College, Anayur**

Sr. No.	Registration Fees for	Amount
1	State Level	
2	National Level	300000
3	International Level	
4	Alumini Registration	
5	others	
	Total	300000

Rupees (In words)

By Cash/Cheque/D.D.No..... Date.....

ofBank


Recipient Signature

Padmashri Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Authorizing Designation: Prof. S. A. Happa

Asst. Professor

2) Basic Pay Rs.: 21600/-

Date: 06/02/17

3) Purpose of journey and order No. Attending conference and 119

From			To			Mode of conveyance i.e., by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
3/2/17	Home	7:30 am	3/2/17	Nagpur BST	8:00 am	Auto	07	40/-	40/-
03/2/17	Nagpur BST	8:15 am	3/2/17	Sondu BST	9:45 am	Private	50	60/-	60/-
03/2/17	Sondu BST	9:50 am	3/2/17	college	10:10	Auto	06	30/-	30/-
04/2/17	college	5:15 pm	4/2/17	Sondu BST	5:35	Auto	06	30/-	30/-
4/2/17	Sondu BST	5:45 pm	4/2/17	Nagpur BST	7:15 pm	Private	50	60/-	60/-
4/2/17	Nagpur BST	7:25 pm	4/2/17	Home	8:00 pm	Auto	07	40/-	40/-

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hall at _____

Total claim Rs. 560/-

Signature



CERTIFICATE

25

Certified that —

1. I have travelled by the shortest route
2. By the class / mode of conveyance for which I am entitled
3. The actual expenditure incurred by me is not less than the claimed amount in the bill
4. I have not taken any advance (of Rs.) for this journey
5. If there is any audit objection and if there is recovery, I am ready to refund the same
6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____

Signature of the claimant

I have checked the T. A. Bill of shri _____

_____ The amount claimed by him may please be passed for payment for Rs. 560/-

Accountant

Approved and passed for payment of Rs. 560/-

Principal

Received the amount of Rs. 560/-

Stamp & Signature of the claimant

2016-17

Dr. VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 717

Dated : 2-Mar-20

Particulars
Account :
Travelling Exps - Staff
Seminar Exps

Through :
Cash

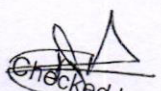
On Account of :
Being Amount Paid To Bhagat B.V Against T.A D.A For National Level Conference At
Shrigonda.

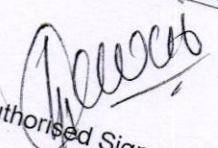
Amount (in words) :
Indian Rupees Five Hundred Sixty Only

Particulars	Amount
Travelling Exps - Staff	310.00
Seminar Exps	250.00

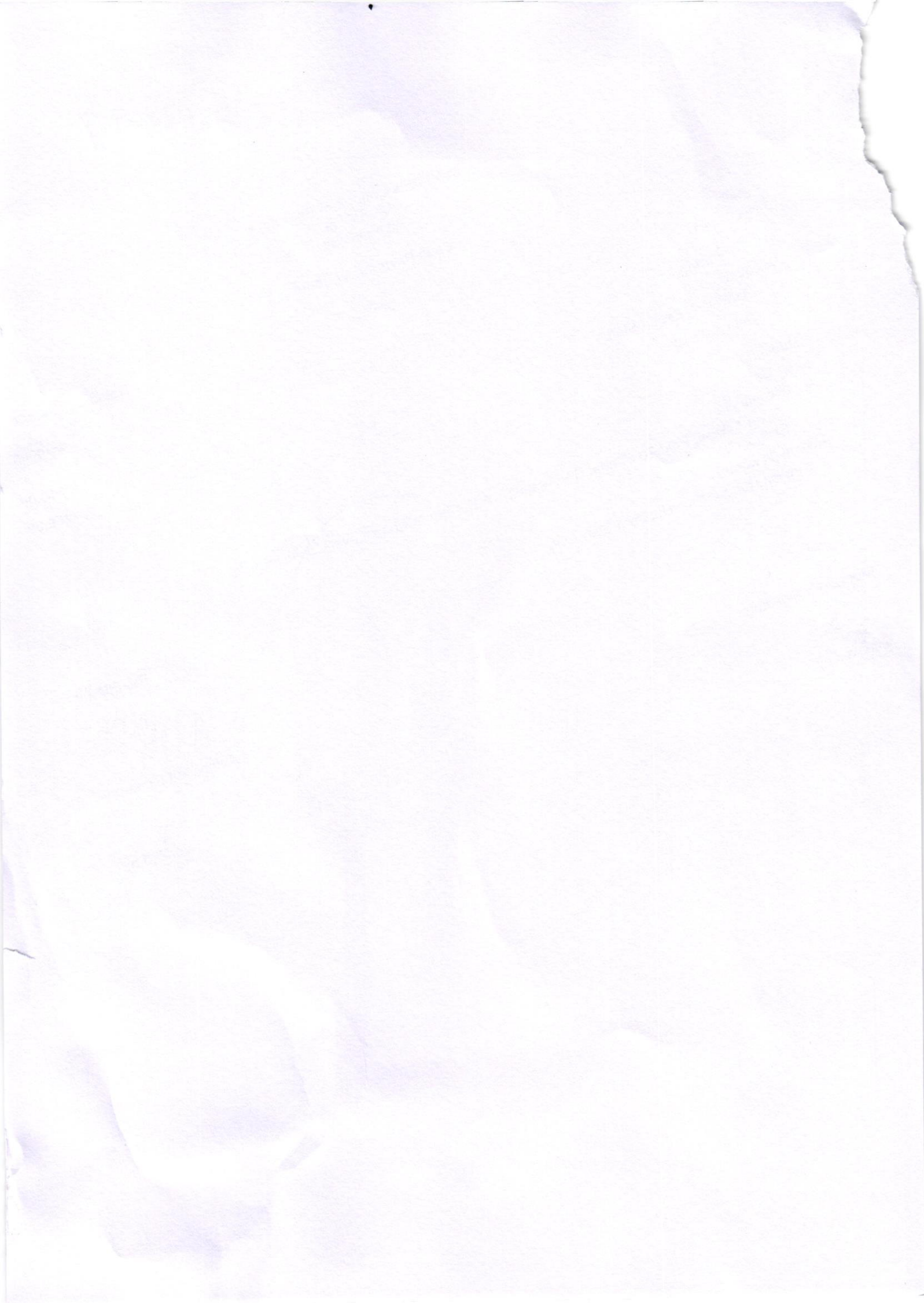
Rs. 560.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by



RECEIPT

Date : /2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil
Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of T.A......

Rs. 560/-

Sign :

Name :

Prof. Bhagyat Sir

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

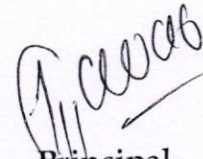
Ref. No. Coph/Esstt./2017/181

Date : 23/02/2017.

:: OFFICE ORDER ::

Shri. B.V. Bhagat (Asstt. Professor) is deputed to Kashti, on 27th & 28th February, 2017, for official work, regarding to attend two days National Level Conference, at Parikrama Group of Institution's College of Pharmacy, Kashti, Tal. Shrigonda, Dist. Ahmednagar.

He is entitled for T.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to:

✓ Shri. B.V. Bhagat

2) Esstt. Section

3) A/c. Section.

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Employee's Name and Designation: Prof Bhagwat B.V. Date: 11/3/2017
 2) Basic Pay Rs: 19810

3) Purpose of journey and order No. Two day national conference, at H.S.B.P.V.T.S. COP, KASHI, C.ceph. Esst 1/2017/181

Date	From		Date	To		Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure		Place	Time of arrival				
27/12/17	H.S.M.E	6:30 AM	27/12/17	NUGUR (BNS STND)	6:50 AM	Auto	7	40	40
27/12/17	NUGUR STND	7:00 AM	27/12/17	KASHI STND	09:00 AM	BNS	70	90	90
27/12/17	KASHI STND	9:05 AM	27/12/17	COP, KASHI	9:30 AM	Auto	4	25	25
28/12/17	COP, KASHI	5:00 PM	28/12/17	S.T. KASHI	5:20 PM	Auto	4	25	25
28/12/17	S.T. KASHI	5:30 PM	28/12/17	S.T. NASHIK	7:30 PM	BNS	70	90	90
31/12/17	S.T. NASHIK	7:35 PM	28/12/17	H.S.M.E	7:55 PM	Auto	7	40	40

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours
 absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at special place.

TOTAL = 310
 REGISTRATION FEE = 250
 TOTAL = 560

Signature: [Signature]
 (Bhagwat B.V.)

Total claim Rs. 560

CERTIFICATE

Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the estimated amount in the bill
- 4. I have not taken any advance (or Rs.) for my journey
- 5. If there is any audit objection and if there is recovery and carry to refund the same
- 6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to

Signature of the claimant
 (B. V. Bhargava)

I have checked the T. A Bill of Shri. Prof. Bhargava B.V.

The amount claimed by him may please be passed for payment to Rs. 500/-

Accountant

Approved and passed for payment of Rs. 500/-

Principal

Received the amount of Rs. 500/-

Stamp & Signature of the claimant

(B. V. Bhargava)



Hon. Shri Babanrao Pachpute Vichardhara Trust's,
Group of Institutions, College of Pharmacy, Kashti.
and Savitribai Phule Pune University, Pune.



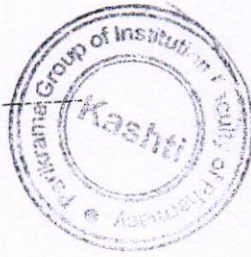
RECEIPT

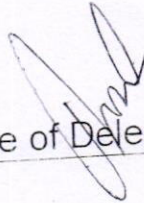
Received with thanks from Dr/Mr/Mrs/Ms Babasaheb vasantao Bhagal

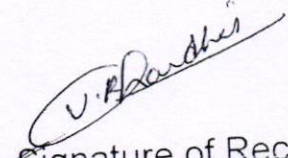
Towards registration of Savitribai Phule Pune University Sponsored, Two days National Conference -
2017 and has paid a sum of Rs 250K (In words) ----- Only by Cash/D.D

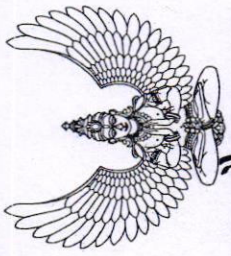
No. -----

Date ----- Bank -----

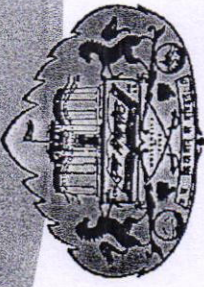



Signature of Delegate


Signature of Receiver



parikrama
Revolution in Education



Savitribai Phule Pune
University, Pune

Certificate

This is to Certify that, Prof./Dr./Mr./Ms..... **Bhagat B.V.**.....
of..... **Vikhe Patil College of Pharmacy**..... has attended/presented a Research Paper entitled
.....

or has been Speaker / Reviewer in the Scientific Sessions of A Two Days National Conference On
“ Novel Emerging Trends in Teaching and Research in Pharmaceutical Sciences.” held at H.S.B.P.V.T’s,
G.O.I.s. College of Pharmacy, Kashti, Ahmednagar, Maharashtra, during 27th & 28th February -2017.

22-02

Convener

Yashwantrao

Co-ordinator

Yashwantrao

Organizing Secretary

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

2016-17

Cash Payment Voucher

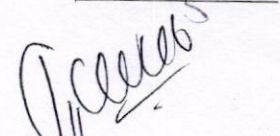
No. : 619

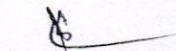
Dated : 30-Jan-2017

Particulars	Amount
Account :	
Travelling Exps - Staff	800.00
Seminar Exps	300.00
Through :	
Cash	
On Account of :	
Being Amount Paid To Kakade S.B Against T.A DA & Seminar Registrat-ion Charges As Per Sanction Attached.	
Amount (in words) :	
Indian Rupees One Thousand One Hundred Only	
	Rs. 1,100.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 20/1/2017

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees One Thousand and one Hundred only

In cash/By Cheque/D.D.No. cash Dated 20/1/2017

Drawn on

Bill no. Dated / / 2017

On Account of Travelling EXP - 800/-
Seminar EXP - 300/-
1100

Rs. 1100/-

Sign: Bud.

Name: Sudashan Balakrishna Katak.

Date: 25th Jan. 2017

No. 8

पति,
मा. प्राचार्य,
डॉ. विठ्ठलराव विश्वे पाटील कॉलेज,
कॉलेज ऑफ कार्मसी, अ. नगर.

विषय :- स्वयंसेवा मंजूरी मिळणेबाबत.
अर्जदार :- प्रा. सुदर्शन काकड.

महोदय,

वरील विषयान्वये कारणे किर्तनी अर्ज
करतो की, दि. 23/1/17 व 24/1/17 रोजी काकडे
कॉलेज ऑफ कार्मसी बोधेगाव येथे STATE LEVEL
SEMINAR करिता गेलो होतो. सदर बाबतचे
रजिस्ट्रेशन फी RS. 300/- मंजूर व्हावी ही किर्तनी
(* सोबत रिसिट जोडली आहे)

A/c
Sanctioned RS. 300/-

आपला विश्वासु
प्रा. सुदर्शन बी. काकड

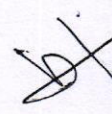
No. 10

Date: 23/11/17

RECEIVED with thanks from Sudanshu B. Kataria

the sum of Rupees 3001- by cheque / draft / cash, in full / part / advance

payment of our Bill No. 148610 Dated 23/11/17 / A/c of. _____

 Signature

₹ 3001-



This receipt is valid subject to Realisation of cheque.

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

Ref. No. Coph/Esstt./2017/ 80

Date : 13/01/2017.

:: OFFICE ORDER ::

Shri. S.B. Kakad (Asstt. Professor) is deputed to Shevgaon, on 23rd & 24th January, 2017, for official work, regarding to attend two days State Level Seminar, at Abasaheb Kakade College of Pharmacy, Bodhegaon, Tal. Shevgaon, Dist. Ahmednagar.

He is entitled for T.A. as per rule.


Principal

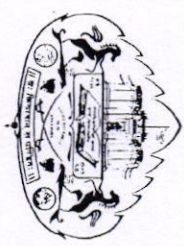
College of Pharmacy,
Ahmednagar.

Copy to:

1) Shri. S.B. Kakad

2) Esstt. Section

3) A/c. Section.



Savitribai Phule Pune University Sponsored Two Day's State Level Seminar on

**“CURRENT SCENARIO ON
DIABETES MELLITUS IN INDIA ”**

23rd & 24th January 2017

Organized by

Navmaharashtra Shikshan Mandal's

Abasaheb Kakade College of B.P. Pharmacy
Bodhegaon, Tal. Shevgaon, Dist. Ahmednagar.

Certificate

This is to certified that Prof. /Dr. /Mr. /Mrs. /Ms.....*Kakad Suddaeshan B.*..... has participated in Savitribai Phule Pune University Sponsored State Level Seminar on **“CURRENT SCENARIO ON DIABETES MELLITUS IN INDIA ”** held on 23rd & 24th January 2017 as resource person / delegate / poster presenter / member of organizing committee. His / Her active participation in the seminar is immensely appreciated.

Asst. Prof. V. B. Gawali
Programme Co-ordinator

Dr. S. R. Pattan
Principal & Convener

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Teacher and Designation

Prof. S. B. Katakad

2) Basic Pay Rs: 15,100/-

Date 25/01/2017

Assistant professor

3) Purpose of journey and order No. State level seminar
Coph / Esstt. / 2017 / 80.

Date	From		Time of departure	To		Time of arrival	Mode of conveyance i.e. by Rail/S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place			Place						
23.01.17	cop, vilad Nagarstand		6:05 AM	Naggar stand		6:30 AM	Auto	15 km	30/-	30/-
	Shergaon		8:30 AM	Shergaon		8:30 AM	Auto private	65 km	90/-	90/-
	Bodhegaon		9:30 AM	Bodhegaon		8:30 AM	private	80 km	50/-	50/-
	cop.		5:00 AM	cop.		9:45 AM	Auto	4 km	30/-	30/-
	Bodhegaon	23.01.17	9:30 PM	Bodhegaon		5:15 PM	Auto	4 km	30/-	30/-
	Shergaon		6:30 PM	Shergaon		6:15 PM	private	30 km	50/-	50/-
	Nagarstand		8:30 PM	Nagarstand		8:30 PM	private	65 km	90/-	90/-
			8:30 PM	home		9:00 PM	Auto	15 km	30/-	30/-

Add - 1) Daily Allowance at ordinary rate at Rs. per day for days i. o. for hours

2) Difference between D.A. at ordinary and special rate at Rs. per day for days i. o. for hours halt at special place.

Total claim Rs. 400/-

Signature [Signature]

Total ⇒ Approved
400/-

CERTIFICATE

Certified that —

- 1 I have travelled by the shortest route
- 2 By the class / mode of conveyance for which I am entitled.
- 3 The actual expenditure incurred by me is not less than the claimed amount in the bill
- 4 I have not taken any advance for Rs. for this journey
- 5 If there is any audit objection and if there is recovery I am ready to refund the same
- 6 I have travelled for the specific work of the Institution and have completed the work for which I was sent to Two day state level seminar at

Gud

Bodhegao.

Signature of the claimant

I have checked the T. A Bill of shri prof. S.B. Katakad.

The amount claimed by him may please be passed for payment to Rs. 400/-

[Signature]
Accountant

Approved and passed for payment of Rs. 400/-

[Signature]
Principal

Received the amount of Rs. 400/-

[Signature]
Stamp & Signature of the claimant

Padmashri Dr. Vitthalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Designation Prof. S.B. Katakad

2) Basic Pay Rs: 15,100/-

Date 25/01/2017

Assist professor

3) Purpose of journey and order No. State level seminar, Coph / Guit / 2017 / 80.

From			To			Mode of conveyance i.e. by Rail/S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or kilometreage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
24.01.17	Coph vidad	6:45 AM	24.01.17	Nagar stand	7:00 AM	15 km	Auto	301/-	301/-
	Stand	7:00 AM		Bodhegao	9:30 AM	95 km	private	1401/-	1401/-
	Bodhegao	9:00 AM		Cop.	9:15 AM	4 km	Auto	301/-	301/-
24.01.17	Cop.	5:15 PM	24.01.17	Bodhegao	5:30 PM	4 km	Auto	301/-	301/-
	Bodhegao	5:30 PM		Nagar stand	9:00 PM	95 km	private	1401/-	1401/-
	Stand	9:00 PM		Home	9:15 PM	15 km	Auto	301/-	301/-

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours

absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hall at _____

Total claim Rs. 4001/-

Signature [Signature]

Total ⇒ 4001/-

CERTIFICATE

Certified that -

1. I have travelled by the shortest route

2. By the class / mode of conveyance for which I am entitled

3. The actual expenditure incurred by me is not less than the amount stated in the bill

4. I have not taken any advance for my expenses for the journey

5. If there is any audit objection and if there is recovery on my part, I am ready to refund the same

6. I have travelled for the specific work of the institution and have completed the work for which I was sent to Two day state level seminar at Bodhegan.

Signature of the claimant

[Signature]
Bodhegan.

I have checked the T. A Bill of shri. Prof. S. B. Katakad.

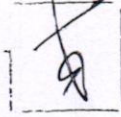
The amount claimed by him may please be passed for payment to Rs. 400/-

[Signature]
Accountant

Approved and passed for payment of Rs. 400/-

[Signature]
Principal

Received the amount of Rs. 400/-



Stamp & Signature of the claimant

2016-17

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

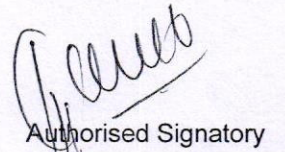
No. : 752

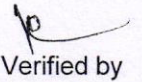
Dated : 10-Mar-2017

Particulars	Amount
Account :	
Misc Expenses	1,000.00
<u>Seminar Exps</u>	<u>300.00</u>
Through :	
Cash	
On Account of :	
Being Amount Paid To Wadekar J.B Against Rangoli Purchase & Semin-ar Registration Fee.	
Amount (in words) :	
Indian Rupees One Thousand Three Hundred Only	
	Rs. 1,300.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date : 10/3 / 2017

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees *one thousand three hundred only*

In cash/By Cheque/D.D.No... *cash*Dated / / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of *MISC. Exp - 1000*
Seminar Exp - 300

Rs. 1300/-

Sign: *[Signature]*

Name: Jyoti B. Wadekar

Date: 27-2-2017

To,
The Principal,
Dr. V.V.P.F.S College of Pharmacy,
Ahmednagar

iv. 69
A/C
Sanctioned Rs. 300/-
11/3/17

Sub: Regarding refund of registration fees
for seminar attended at ACoP, Sangamner

Respected Sir,

I Prof. Jyoti B. Wadekar has attended
SPPU sponsored two days national conference on
'Opportunities & challenges in development of
herbal formulation at Anantvaliki College
of Pharmacy, Sangamner on 10. & 11. Feb 2017.
The registration fees for the same was Rs. 300/-
So, I kindly request you to refund the
same.

Thanking you.

closed:
Receipt of registration fee

Yours Faithfully
(J.B. Wadekar)

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1396 Date : 10/02/2017
Name Wadekar Jyoti Balasaheb
Address PDVVP College of pharmacy, Teacher. Class Teacher.
Nagar.

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	}	
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
Registration fees	300 =	00
Rupees in words <u>Three</u> <u>Hundred only.</u>	300/-	

[Signature]
Cashier

Date: 6.3.2017

No. 7101

~~AC~~

Sanctioned Rs. 1000/-

~~1000/-~~
10/3/17

The Principal,
Dr. V.V.P.F's COP,
Ahmednagar

Subject: Submission of cash bills of Rs. 1000/-

~~Respected~~
Respected Sir,

With reference to above cited subject, I Prof. Ms. Jyoti Wadekar, kindly request you to herewith submit cash bills ^{of Rs. 1000/-} towards advance taken for procurement of rangoli colours for one day state level seminar on 'Recent Trends in Pharma Industry on 15th Oct. 2016.

Kindly do the needful.

~~Forwarded~~
Thanking You,
~~AC~~
6/3/17

Your's Faithful
C.J.B. Wad

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Journal Voucher

No. : ²⁶⁹
~~268~~


Dated : 5-Feb-2018

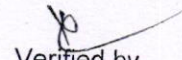
Particulars	Debit	Credit
Travelling Exps - Staff To Sawant R.L (Work Adv)	<i>Dr</i> 270.00	270.00
	Rs. 270.00	Rs. 270.00

On Account of :

Being Expenses Occurred Against T.A D.A Of Dr.R.L.Sawant
Regarding To Attand SDO Meeting At Rahuri College As Per
T.A Bill & Office Order Attached.

Authorised Signatory


Checked by


Verified by

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

Ref. No. Coph/Esstt./2018/ 64

Date : 04/01/2018.

:: OFFICE ORDER ::

Prof. Dr. R.L. Sawant (Professor) is deputed to Rahuri, on 5th January, 2018, for official work (Regarding to attend SDO meeting), at Rahuri College, Rahuri, Dist. Ahmednagar.

He is entitled for T.A. & D.A. as per rule.



(Handwritten Signature)

Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. Dr. R.L. Sawant (Professor)

3) A/c. Section

4) Esstt. Section

(A)

~~Prof. Dr. Sawant R.L.~~ Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

1) Name and Designation: Prof. Dr. Sawant R.L.

2) Basic Pay Rs: _____

Date: 05/1/2018

H.O.D. pharm. chem. & P.G. studies

3) Purpose of journey and order No. Students Development officers workshop

Date	From		To		Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure	Date	Place				
05/1/18	Home	7:30am	05/1	Nagar Stand	7	07 Km	20=00	20=00
05/1/18	Nagar Stand	8:00am	05/1	Rahuri Stand	7	40 Km	45=00	45=00
05/1/18	Rahuri Stand	9:35am	05/1	Rahuri College	7	5 Km	15=00	15=00
05/1/18	Rahuri College	05:10pm	05/1	Rahuri Stand	7	5 Km	15=00	15=00
05/1/18	Rahuri Stand	05:45am	05/1	Nagar	7	40 Km	45=00	45=00
05/1/18	Nagar Stand	7:20 pm	05/1	Home	7	07 Km	20=00	130=00

Add :- 1) Daily Allowance at ordinary rate at Rs. 130 per day for _____ days i. e. for _____ hours absence from the place of Head Quarter. 270=00

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at special place.

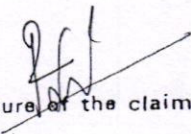
Total claim Rs. 270

[Signature]
Signature

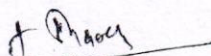
CERTIFICATE

Certified that —

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled.
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6) I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____


 Signature of the claimant


I have checked the T. A Bill of shri Shri R. L. Sawant
 _____ The amount claimed by him may please
 be passed for payment for Rs. 250/-


 Accountant

Approved and passed for payment of Rs. 250/-

Principal

Received the amount of Rs. 250/-


 Stamp & Signature of the claimant

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar


Cash Payment Voucher

No. : 542

Dated : 8-Mar-2018

Particulars	Amount
Account : Seminar Exps	1,000.00
Through : Cash	
On Account of : Being Amount Paid To Pawar N.S Against Seminar Registration Fee As Per Receipt Attached.	
Amount (in words) : Indian Rupees One Thousand Only	
	Rs. 1,000.00

Receiver's Signature:


Checked by

Authorised Signatory

Verified by

RECEIPT

Date: 8/3 /2018

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees One Thousand only

In cash/By Cheque/D.D.No. can Dated 8/3 / 2018

Drawn on

Bill no.....Dated / /2017

On Account of work Adv.

Rs. 1000/-

Sign:

Name:

Prof. N. S. Pawar

22

08/03/2018

To,

The Principal,

D.V.V.P.F's College Of Pharmacy,
Ahmednagar.

A/c

Sanctioned Rs 1000/-

Pawar
8/3/2018.

Subject :- Regarding Registration Fee.

Respected Sir,

With respect to above cited subject we. Prof. N.S. Pawar & Prof. M.K. Tanikase have attended two days national level seminar regarding "New NAAC accreditation process and benefits" at IBMRD, Vitadghat, Ahmednagar on 6th & 7th march 2018. The registration fee for the same is 5000/- per delegate.

So we request you to sanction Rs 1000/- as seminar fee.

Thanking You.

- 1) Prof. N.S. Pawar
- 2) Prof. M.K. Tanikase

Yours faithfully.

Pawar
M.K. Tanikase



Misc. Receipt Book

No.: 836 Date: 6/3/2017
 Name / Mr. / Miss. Nilima Patil
 Roll No.: _____ Class: _____
 Received the sum of Rs. 500/-
 (In words) Rs. Five hundred Rupees.
 on account of _____

Sr. No.	Particulars	Amount	
		Rs.	P.
1.	Fine (Library)		
2.	Sale of Prospectus		
3.	Recovery for		
4.	Telephone Charges		
5.	Leaving / Bonafide / Character Certificate Charges		
6.	Examination a) Form		
	b) Fees		
7.	Railway concession form		
8.	Eligibility Fees		
9.	Other Receipts	500	
Total Rs.-		500/-	

(Signature)
 CASHIER

Padmashri Dr. Vithalrao Vikhe Patil Foundation's
Institute of Business Management & Rural Development
 P.O. M.I.D.C., Vilad Ghat, Ahmednagar - 414 111. (M.S.)



Misc. Receipt Book

No.: 837

Date: 13/12/18

Name / Mr. / Miss. Madhukani

Jarkase

Class: _____

Roll No.: _____

Received the sum of Rs. 500/-

(In words) Rs. Five Hundred Rupees

on account of _____

Sr. No.	Particulars	Amount	
		Rs.	Ps.
1.	Fine (Library)		
2.	Sale of Prospectus		
3.	Recovery for		
4.	Telephone Charges		
5.	Leaving / Bonafide / Character Certificate Charges		
6.	Examination	a) Form	
		b) Fees	
7.	Railway concession form		
8.	Eligibility Fees		
9.	Other Receipts		
		Total Rs.-	500 -
			500

[Signature]
 CASHIER

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 479

Dated : 6-Feb-2018

Particulars

Account :

Travelling Exps - Staff

Amount

832.00

Through :

Cash

On Account of :

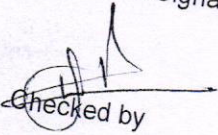
Being Amount PAid To Ambekar A.W Against T.A Bill For Attend Two Days
National Level Workshop At Amrutvahini College Sangamner As Per T.A Bill &
Office Order Attached.

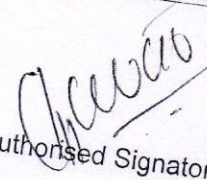
Amount (in words) :

Indian Rupees Eight Hundred Thirty Two Only

Rs. 832.00

Receiver's Signature:


Checked by


Authorised Signatory

Verified by

RECEIPT

Date : 06/2/2018

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees Eight Hundred Thirty Two only

In cash/By Cheque/D.D.No. Cash Dated 6/2 / 2018

Drawn on

Bill no. Dated / / 2017

On Account of T.A

Rs. 832/-

Sign : 
Name : Ambekar A.W

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

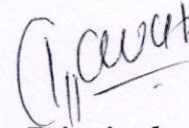
Ref. No. Coph/Esstt./2018/142

Date : 01/02/2018.

:: OFFICE ORDER ::

Prof. A.W. Ambekar & Prof. S.A. Hapse (Asstt. Professor) are deputed to Sangamner, on 2nd February & 3rd February, 2018, for official work (regarding to attend two days national level workshop), at Amrutvahini College of Pharmacy, Sangamner, Dist. Ahmednagar.

They are entitled for T.A. only as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

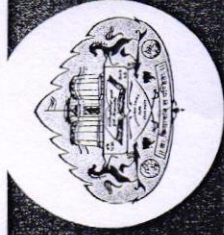
- 1) Prof. A.W. Ambekar 2) Prof. S.A. Hapse 3) Esstt. Section 4) A/c. Section.



Amrutvahini Sheti & Shikshan Vikas Sanstha's

AMRUTVAHINI COLLEGE OF PHARMACY

Amrutnagar, Sangamner, Dist. Ahmednagar (Maharashtra)



Certificate

This is Certified that,

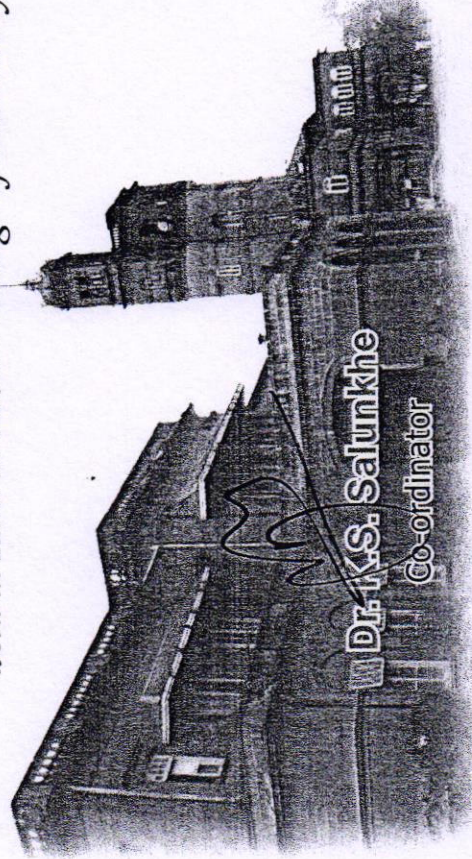
✓ *Prof./Dr./Mr./Mrs./Ms. Ambekar Abdul Wahid.*

has participated as a Resource Person / Presenter / Volunteer / Delegate in the

Savitribai Phule Pune University sponsored Two days National Level Workshop on

NATIONAL LEVEL WORKSHOP ON FLUIDIZED BED PROCESSOR, SPRAY DRYER & PROBE SONICATOR

held at Amrutvahini College of Pharmacy, Sangamner from 2nd & 3rd February, 2018



Padmashri Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY AHEMDNAGAR
TRAVELLING ALLOWANCE BILL

Employee Designation: Amberal Abdul Wahid 2) Basic Pay Rs: 29,000 Date: 05/02/18
 3) Purpose of journey and order No. To attend seminars at Sangamner Cop.

From		To		Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Date	Place				
2/2/18	Home	2/2/18	B.S. Nagar	Auto	06 km	50	50
2/2/18	B.S. Nagar	2/2/18	B.S. Dong	Bus	100 km	100	100
2/2/18	B.S. Dong	2/2/18	COP, Dong	Auto	05 km	50	50
2/2/18	COP, Dong	2/2/18	B.S. Dong	Auto	05 km	50	50
2/2/18	B.S. Dong	2/2/18	B.S. Nagar	Bus	100 km	100	100
2/2/18	B.S. Nagar	2/2/18	Home	Auto	06 km	50	50

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours
 absence from the place of Head Quarter.
 2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at
 special place.

Total claim Rs. 416

(Signature)
 Signature



Forward
 10/11/18

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR
 TRAVELLING ALLOWANCE BILL

Designation: Amberhas Abdul Wahid Date: 05/02/18
 2) Basic Pay Rs: 29000/-
 3) Purpose of journey and order No. To attend Seminars at Songmner COP.

From		To			Mode of conveyance i.e. by Rail/S,T, / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Date	Place	Time of arrival				
3/1/18	Home	3/2/18	B.S. Nagar	6.20 A.M	8 Km	50	50	
3/2/18	B.S. Nagar	3/2/18	B.S. Song	9.20 A.M	100 Km	108	108	
3/2/18	B.S. Song	3/2/18	COP, Song	9.45 A.M	05 Km	50	50	
3/2/18	COP, Song	3/2/18	B.S. Song	5.35 P.M	05 Km	50	50	
3/2/18	B.S. Song	3/2/18	B.S. Nagar	9.30 P.M	100 Km	108	108	
3/2/18	B.S. Nagar	3/2/18	Home	10.00 P.M	06 Km	50	50	

ADD - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours absence from the place of Head Quarter.
 2) Difference between D.A. at or dineary and special rate at Rs. _____ per day for _____ hall at special place.

Total claim Rs. 832/-
 416 + 416 = 832

[Signature]
 Signature

CERTIFICATE

Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the amount claimed in the bill
- 4. I have not taken any advance for my journey
- 5. If there is any audit objection and if there is recovery on my part to refund the same
- 6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to ~~Longemans~~ Longemans Private Bus. Ticket not available.

Signature of the claimant

[Handwritten Signature]

I have checked the T. A Bill of Rs. 832/- (Ambedkar A.W.)

The amount claimed by him may please be passed for payment to Rs. 88-832/- (Eight Hundred and thirty two only) Two

[Handwritten note: Two only]

[Handwritten Signature]

Approved and passed for payment of Rs. 832/-

Principal

[Handwritten Signature]

Received the amount of Rs. _____



Stamp & Signature of the claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

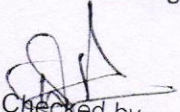
Cash Payment Voucher

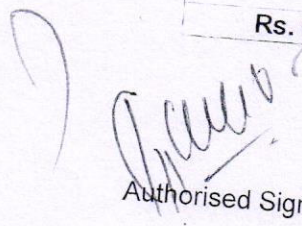
No. : 476

Dated : 5-Feb-2018

Particulars	Amount
Account : Registration Fees	600.00
Through : Cash	
On Account of : Being Amount Paid To Ambekar A.W Against National Level Workshop As Per Certificate & Registration Receipt Attached.	
Amount (in words) : Indian Rupees Six Hundred Only	
	Rs. 600.00

Receiver's Signature:


Checked by


Authorised Signatory

Verified by

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 477

Dated : 5-Feb-2018

Particulars	Amount
Account : Travelling Exps - Staff	1,033.00
continued ...	

RECEIPT

Date : 5/2/2018

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees Six Hundred only

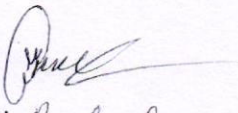
In cash/By Cheque/D.D.No. can Dated 5/2/2018

Drawn on

Bill no. Dated / / 2017

On Account of Registration Fee

Rs. 600/-

Sign : 

Name : Ambekar A. V.

RECEIPT BOOK

No. 1949

Date : 02/02/2018

Name: Ambekar Abdul Wahid

Address: Dr. V. V. P. F. 's A. Nagar class Faculty

Particulars	Rs.	Ps.
1) Printing & Stationary Charges		
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) Workshop Registration fee	600	
Rupees in words <u>SIX</u>		
<u>Hundred only</u>	600/-	

ML
Cashier

Date:-5/1/18

To,
The Principal
DR. V. V. P. F'S
College of Pharmacy.
Ahmednagar.

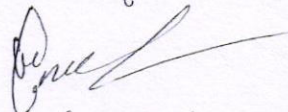
Subject: Regarding sanction of Bill.

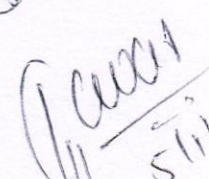
Respected Sir,

With reference to the above mentioned subject, I request you to kindly sanction Rs 600/- (Six Hundred only) for the registration fees of State Level Seminar at Amruthnabini College of Pharmacy, Songamner.

Kindly sanction the same.

Thanking you.

Yours faithfully,

Anil K. A. W.

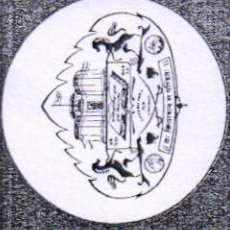
AIC
Sanctioned Rs. 600/-

5/1/2018



Amrutvahini Sheti & Shikshan Vikas Sanstha's

AMRUTVAHINI COLLEGE OF PHARMACY

Amrutnagar, Sangamner, Dist. Ahmednagar (Maharashtra)



Certificate

This is Certified that,

✓ *Prof./Dr./Mr./Mrs./Ms. Ambekar Abdul Wahid.*

has participated as a Resource Person / Presenter / Volunteer / Delegate in the

Savitribai Phule Pune University sponsored Two days National Level Workshop on

NATIONAL LEVEL WORKSHOP ON FLUIDIZED BED PROCESSOR, SPRAY DRYER & PROBE SONICATOR

held at Amrutvahini College of Pharmacy, Sangamner from 2nd & 3rd February, 2018



Dr. K.S. Salunkhe
Co-ordinator



Dr. M.J. Chavan
Convener

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

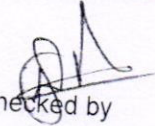
(Page 2)


No. : 477

Dated : 5-Feb-2018

Particulars	Amount
Registration Fees	300.00
Through : Cash	
On Account of : Being Amount Paid To Nangare A.K Against National Level Workshop As Per Certificate & Registration Receipt Attached T.A For Sangamner As Per Sanction Attached.	
Amount (in words) : Indian Rupees One Thousand Three Hundred Thirty Three Only	
	Rs. 1,333.00

Receiver's Signature:


Checked by


Authorised Signatory

Verified by

RECEIPT

Date : / / 2018

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Chat, Ahmednagar.

The sum of Rupees ... *one thousand three hundred thirty three* ...

In cash/By Cheque/D.D.No.....Dated / / 2018

Drawn on

Bill no.....Dated / / 2017

On Account of *T: A:*

Registration Fee - 300/-

1033/-

Rs. 1333/-

Sign : *[Signature]*

Name : *A. E. Jangam*

प्राति,
 मा. प्राचार्य
 डॉ. विठ्ठलराव विश्वे पटील कॉलेज
 कॉलेज ऑफ फार्मसी, अहमदनगर.

2/2/2018
 (संकोच)

88
 AC
 Sanctioned
 Rs 317/-
 5/2/18

विवरण :- स्वर्चासि मंजूरी मिळणेबाबत.
 अर्जदार :- प्रा. अजित कृष्ण मांगरे.
 (N.S.S. Pimpri Chinchwad Office)

मा. महोदय,

वरील विषयाचे कारणे विनंती अर्ज करतो
 की आपल्या महाविद्यालयाचे शा.से.शा. विशेष हिकाळी
 झिडीर 8 जाने. ते 14 जाने. 2018 दरम्यान पर पडले. सदर
 झिडीरकरिता जाडे (रोके) आणव्याकरिता गेले होते.

तसेच Poythn Territory मध्ये शांना आणव्याकरिता
 करिता आणव्याकरिता गेले होते. सदरचा तपशील -

कॉलेज ते पिंपळगाव माळवी = $25 \times 2.5 = \sqrt{62.50}$ - (3/1/2018)
 पिंपळगाव माळवी ते निंबळक = $35 \times 2.5 = \sqrt{87.50}$ - (3/1/2018)
 निंबळक ते फार्मसी कॉलेज = $8 \times 2.5 = \sqrt{20}$ - (3/1/2018)

Guest Lect. तपशील \Rightarrow [12/1/2018]

आवेडी ते निंबळक = $15 \times 2.5 = \sqrt{37.50}$

निंबळक ते दिल्ली गेट = $22 \times 2.5 = \sqrt{55}$

दिल्ली गेट ते निंबळक = $22 \times 2.5 = \sqrt{55}$

एकूण = $\sqrt{917.50}$

अर्जाचे $\sqrt{317.50}$ रुपये मंजूर व्हावे. ही विनंती

Ac...tion
 Col...armacy
 Ahmednagar

आपला

प्रा. अजित मांगरे

As sanctioned
RS. 10161
5/18/18

2/2/2018
65 (शुक्रवार)

प्रति,
मा. प्राचार्य

डी. विठ्ठलराव विश्वे वाली कॉलेज,
कॉलेज ऑफ फार्मसी, अ. नगर.

विषय :- स्वर्चास मंजूरी मिळणेबाबत.
अर्जदार :- प्रा. अजित कृष्णा नांगरे.
(DEPT. OF P'chem)
मा. महोदय

Account Officer
College of Pharmacy
Ahmednagar

वरील विषयान्वये कारणे विनंती अर्ज करतो की, दि. 31 जाने. व 1 फेब्रुवारी 2018 रोजी असृतवाहिनी कॉलेज ऑफ फार्मसी येथे 2 दिवसांच्या कार्यशाळेकरिता मला पाठविण्यात आले होते. सदर ललितेचे नं. A. व रजि स्टेशन स्वर्चास मंजूरी मिळावी.

तपशील :- 31/1/2018 (बुधवार)
नगर स्टॅण्ड ते संगमनेर स्टॅण्ड = रु. 900/-
संगमनेर स्टॅण्ड ते असृतवाहिनी कॉलेज = रु. 100/- - 06 k.M
असृतवाहिनी कॉलेज ते संगमनेर स्टॅण्ड = रु. 100/-
संगमनेर स्टॅण्ड ते अ. नगर स्टॅण्ड = रु. 900/-
अ. नगर स्टॅण्ड ते घर = रु. 30/-

9/2/2018 (शुक्रवार) नगर स्टॅण्ड ते संगमनेर स्टॅण्ड = रु. 920/- (Private)
संगमनेर स्टॅण्ड ते असृतवाहिनी कॉलेज = रु. 100/-
असृतवाहिनी कॉलेज ते संगमनेर स्टॅण्ड = रु. 100/-
संगमनेर स्टॅण्ड ते अ. नगर स्टॅण्ड = रु. 920/- (Private)
अ. नगर स्टॅण्ड ते घर = रु. 30/-
रजि स्टेशन को = रु. 300/- एकूण = रु. 9096/-

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1827 Date : 31/01/2018

Name Prof. Ajit K. Nangare.

Address Dr. Vithalrao Class Staff
Vitne Pahi, Nagar.

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	300	00
2) Miscellaneous Receipt	}	
3) Xerox Charges		
4) Other Charges		
5) Registration		
Rupees in words <u>Three</u> <u>Hundred Rupees only.</u>	300	00

Amal
Cashier

रॉ. प. पारनेर त. गांर
 क्र: ०२२५३५३५ ३१/०६/८८ १६:१४:३५
 साधो व. १५५५५ १५५५५
 संगमनेर ते
 अहमदनगर
 प्रवासात मूळ रकम (०६) ५३३३५
 फुल: ₹ ४१००.०० = ₹ १०७.००
 अ. स. विधी र. म. ₹ १.००
 ₹ १०८.००
 PMSH ५३५३५ ३१/०६/८८ S G Waling
 अहमदनगर ४१००३३३

र. प. पारनेर त. गांर
 क्र: ०२२५३५३५ ३१/०६/८८ १६:१४:३५
 साधो व. १५५५५ १५५५५
 संगमनेर ते
 अहमदनगर
 प्रवासात मूळ रकम (०६) ५३३३५
 मुल: ₹ ४१००.०० = ₹ १०७.००
 अ. स. विधी र. म. ₹ १.००
 ₹ १०८.००
 PMSH ५३५३५ ३१/०६/८८ S G Waling
 अहमदनगर ४१००३३३

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

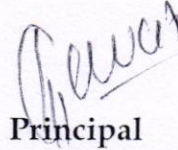
Ref. No. Coph/Esstt./2018/135

Date : 30/01/2018.

:: OFFICE ORDER ::

Prof. A.K. Nangare (Asstt. Professor) is deputed to Sangamner, on 30th January & 1st February, 2018, for official work (regarding to attend two days state level conference), at Amrutvahini College of Pharmacy, Sangamner, Dist. Ahmednagar.

He is entitled for T.A. only as per rule.



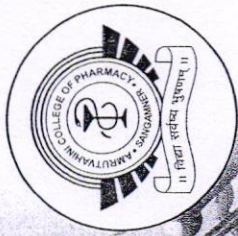
Principal
College of Pharmacy,
Ahmednagar.

Copy to:

1) Prof. A.K. Nangare

2) Esstt. Section

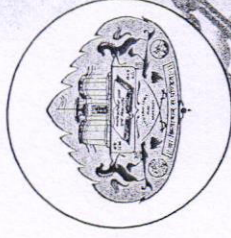
3) A/c. Section.



Amrutvahini Sheti & Shikshan Vikas Sanstha's

AMRUTVAHINI COLLEGE OF PHARMACY

Amrutnagar, Sangamner, Dist. Ahmednagar (Maharashtra)



CONFERENCE

Dr./Mr./Mrs./Ms. *Nangare Ajit Krushna*

has participated as a Delegate in the

Savitribai Phule Pune University sponsored Two days State Level Conference on

RECENT TRENDS IN ANALYTICAL & BIO-ANALYTICAL CHROMATOGRAPHIC TECHNIQUES

held at Amrutvahini College of Pharmacy, Sangamner from 31st January – 1st February, 2018

and presented a poster entitled

Dr. R. N. Kachave

Co-ordinator

Dr. M. J. Chavan

Principal & Convener

Cash Payment Voucher

(Page 2)

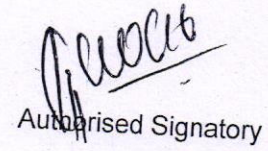
No. : 293

Dated 12-Oct-2017

Particulars	Amount
Printing & Stationery	150.00
Through : Cash	
On Account of : Being Amount Paid To Godge G.R Against T.A D.A, Seminar Registration Fee & Xerox Bill As Per Sanction Attached.	
Amount (in words) : Indian Rupees Nine Hundred Twenty Six Only	
	Rs. 926.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 293

Dated : 12-Oct-2017

Particulars	Amount
Account :	
Travelling Exps - Staff	526.00
Seminar Exps	250.00

continued ...

RECEIPT

Date: 12/10/2017

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees Nine Hundred Twenty Six only

In cash/By Cheque/D.D.No. cash Dated 12/10/2017


Drawn on

Bill no.....Dated / /2017

On Account of Travelling Exp - 526/-
Seminar Exp - 250/-
Printing & Stationery - 150/-

Rs. 926/-

Sign:
Name:


(Dr. G.R. Godge)

Date:- 7/10/17

To,
The Principal,
COP, A' Nagar

Subject :- About sanction of Bill.

Respected Sir,

With reference to above subject,
please sanction bill of Rs. 150/- for
color printout & reduction charges for
Snehalaya Camp Certificate.
Kindly do the needful.

Thanking You,

Rs. 150/-

AC
Sanctioned Rs. 150/-
A. K. Wadgaonkar
7/10/17

Truly
Yours faithfully
(Dr. G. R. Wadgaonkar)

॥ श्री ॥

अक्षय जम्बो झेरॉक्स

शॉप नं. ११ व १२, सैनिक गुलमोहर, गुलमोहर रोड, अहमदनगर.

फोन : ०२४१-२४२१६२६

नंबर 1965

दिनांक : २ / १० / २०१०

नांव प्राचार्य, कॉलेज ऑफ फार्मसी

तपशील	नग	दर	रक्कम
Reduction Xerox with color fugi ● Page	5	30/-	150/-
		एकूण	150/-

अक्षय जम्बो झेरॉक्स करिता

3/10/17

To,
The Principal,
COP. A'Ngr

AC
sanctioned Rs. 250/-
3/10/17

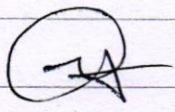
Subject:- About Reg. fees for Dr. D.Y. Patil COP National Level seminar.

Respected Sir,

With reference to above subject, i have paid Rs. 250/- against registration fees to attend two days national level conference held at D.Y. Patil COP, Pimpri, Pune dated 22nd + 23rd Sep - 2017.

Kindly do the needful,

Total Amt Rs. 250/-


Yours faithfully
(Dr. G.R. Godse)



Dr. D. Y. Patil Vidya Pratishthan Society's
**Dr. D. Y. PATIL INSTITUTE OF
PHARMACEUTICAL SCIENCES & RESEARCH**
PIMPRI, PUNE - 411 018.

MISCELLANEOUS RECEIPT
M. PHARM

Date : 22/9/2017

Receipt No.: 328

Name of the Student in full

Dr. G. R. Gadge

Class

Faculty

Year

2017-18

Sr.No.	Particulars	Amount ₹	Ps.
1	Admission Form & Prospectus		
2	Eligibility Fee		
3	Revaluation & Verification Fee		
4	T. C. / Bonafide Certificate Fee		
5	University Pro-Rata Fees		
6	National Insurance Scheme Fee		
7	Breakage		
8	Physical Education Scheme		
9	Others (if any) - ICMR Seminar Regn. Fee	250.00	
Amount in words ₹ Two hundred fifty only		TOTAL	250.00

Mode of Payment Cash / D.D. / P.O.No.

Cash

Dated

Drawn on Bank

Branch

CONDITIONS

1. The admission is purely provisional and is subject to confirmation by University of Pune.
2. The payment of fees does not give right to admission.
3. Any legal dispute between the college & student or his / her parent / guardian, arising out of the relation established by admission, will be dealt with in the court to C.J.J.D., Pimpri, Pune, Maharashtra State.
4. This original receipt must be produced while claiming the refund in case of cancellation of admission or leaving the college prior to completion of the course.

I have read the conditions of admission rules & regulations given in information brochure of the college and University of Pune.

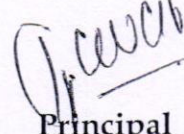
I agree to abide by them.

Receiver's Signature

:: OFFICE ORDER ::

Prof. Dr.G.R.Godge (Asstt. Professor) was deputed to Pune, on 22nd & 23rd September, 2017, for official work, regarding to attend two days National Level Seminar, at Dr. D.Y.Patil Institute of Pharmaceutical Sciences and Research, Pimpri, Pune.

He is entitled for T.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. Dr.G.R.Godge

2) Esstt. Section

3) A/c. Section.

रा. प. यावल आगर
क्र:०१४४४९ २१/०९/१७ १९:३७:२९
साधी वस L०४३६०७B9EFD
तारकपुर ते
शिवाजीनगर पुणे
(प्रवासाचे एकूण टप्पे = ०) २८५०७
फुल: १ X१३२.०० = ₹१३२.००
अ. स. निधी: १X१.०० = ₹१.००
₹१३३.००
YWL०५०५५ ०२०४५६५ P B RAJPUT
अहस्तांतरणीय ००३६९०१३०७

रा. प. यावल आगर
क्र:०१४४४९ २१/०९/१७ १९:३७:२९
साधी वस L०४३६०७B9EFD
तारकपुर ते
शिवाजीनगर पुणे
(प्रवासाचे एकूण टप्पे = २१) २८५०७
फुल: १ X१३२.०० = ₹१३२.००
अ. स. निधी: १X१.०० = ₹१.००
₹१३३.००
YWL०५०५५ ०२०४५६५ P B RAJPUT
अहस्तांतरणीय ००३६९०१३०७

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

1) Name and Designation: Dr. G. R. Godge Date: 3/10/2007
Asst. Professor,
COP, A'Nager
 2) Basic Pay Rs: _____
 3) Purpose of journey and order No. To attend Two days National Conference

From		To			Mode of conveyance i.e, by Rail /S,T, / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place				
1	2	3	4	5	7	8	9	10
21-9-17	Home	7:00 pm	21-9-17	Stand	Auto	8 km	50/-	50/-
21-9-17	Stand	7:30 pm	21-9-17	Shivajingr	Bus	120 km	133/-	133/-
22-9-17	Shivajingr	8:30 am	22-9-17	D.Y. Patsi Pimpri	Auto	25 km	80/-	80/-
23-9-17	D.Y. Patsi Pimpri	5:30 pm	23-9-17	Shivajingr	Auto	25 km	80/-	80/-
23-9-17	Shivajingr	6:45 pm	23-9-17	A'Ngr	Bus	120 km	133/-	133/-
23-9-17	A'Ngr Stand	10:00 pm	23-9-17	Home	Auto	8 km	50/-	50/-

Add :- 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. e. for _____ hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at special place.

Total claim Rs. 526/-


(Signature)
Signature

CERTIFICATE

36

Certified that —

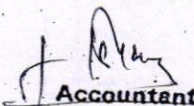
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled,
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs. 526/-) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6) I have travelled for the specific work of the Institution and have completed the work for which I was sent to Dr. D.Y. Patil College of Pharmacy
Pimpri, Pune



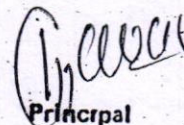
Signature of the claimant

I have checked the T. A Bill of shri Dr. A. R. Gadge

The amount claimed by him may please
be passed for payment to Rs. 526/-


Accountant

Approved and passed for payment of Rs. 526/-


Principal

Received the amount of Rs. 526/-



Stamp & Signature of the
claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

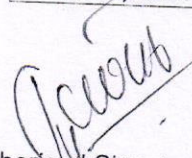
Cash Payment Voucher

No. : 482

Dated : 7-Feb-2018

Particulars	Amount
Account :	
Travelling Exps - Staff	832.00
Registration Fees	600.00
Through :	
Cash	
On Account of :	
Being Amount Paid To Hapse S.A Against T.A D.A & Registration Fee For Work At Sangamner Pharmacy College As Per Bill & Office Order Attached.	
Amount (in words) :	
Indian Rupees One Thousand Four Hundred Thirty Two Only	
	Rs. 1,432.00

Receiver's Signature:


Authorised Signatory

Checked by

Verified by

RECEIPT

Date: 7/2/2018

pad

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees One thousand four hundred forty two

In cash/By Cheque/D.D.No.....Dated / / 2018

Drawn on

Bill no.....Dated / / 2017

On Account of T.A - 832

Registration - 600
Fee 1432/-

Rs. 1432/-

Sign: 

Name: S.A. Hapse

Amrutvanini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
Amrutnagar, Tal. Sangamner

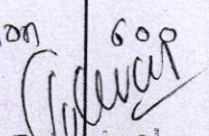
RECEIPT BOOK

No. 1948

Date : 02/02/2018

Name Prof. Sandip A. Hapse

Address Dr. V. V. P. F's A. Nagar Class Faculty.

Particulars	Rs.	Ps.
1) Printing & Stationary Charges		
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) Workshop Registration fee	600	
 Principal Dr. Vitthalrao Vikhe Patil Foundation's College of Pharmacy, Ahmednagar		
Rupees in words ... Six Hundred only	600/-	


Cashier

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

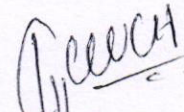
Ref. No. Coph/Esstt./2018/142

Date : 01/02/2018.

:: OFFICE ORDER ::

Prof. A.W. Ambekar & Prof. S.A. Hapse (Asstt. Professor) are deputed to Sangamner, on 2nd February & 3rd February, 2018, for official work (regarding to attend two days national level workshop), at Amrutvahini College of Pharmacy, Sangamner, Dist. Ahmednagar.

They are entitled for T.A. only as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

- 1) Prof. A.W. Ambekar 2) Prof. S.A. Hapse 3) Esstt. Section 4) ~~A/c. Section.~~



Amrutvahini Sheti & Shikshan Vikas Sanstha's

AMRUTVAHINI COLLEGE OF PHARMACY

Amrutnagar, Sangamner, Dist. Ahmednagar (Maharashtra)



Certificate

This is Certified that,

✓ Prof./Dr./Mr./Mrs./Ms. *Sandip Appasaheb Hapse.*

has participated as a Resource Person / Presenter / Volunteer / Delegate in the

Savitribai Phule Pune University sponsored Two days National Level Workshop on

NATIONAL LEVEL WORKSHOP ON FLUIDIZED BED PROCESSOR, SPRAY DRYER & PROBE SONICATOR

held at Amrutvahini College of Pharmacy, Sangamner from 2nd & 3rd February, 2018



Dr. K.S. Salunkhe
Co-ordinator



Dr. M. J. Ghavan
Convener

Padmeshri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHEMDNAGAR
TRAVELLING ALLOWANCE BILL

Designation: Bandip A. Hapse Date: 8/2/18
Asst. Professor 2) Basic Pay Rs: 21,600/-
 3) Purpose of journey and order No. National level workshop Sengamesh-

Date	From		Date	To		Mode of conveyance i.e. by Rail/S.T./ Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time o departure		Place	Time of arrival				
2/2/18	Home	6:00 am	2/2/18	Nagreg	6:30	Auto	6 km	50/-	50/-
2/2/18	Nagreg	8:45 am	2/2/18	Sangli	9:40	Private	100 km	108/-	108/-
2/2/18	Sang. BST	9:45 am	2/2/18	ACOP, Sangli	10:05	Auto	6 km	50/-	50/-
2/2/18	ACOP, Sangli	5:15 pm	2/2/18	Sang. BST	5:35	Auto	6 km	50/-	50/-
2/2/18	Sang. BST	5:45 pm	2/2/18	Nagreg	8:30	Private	100 km	108/-	108/-
2/2/18	Nagreg	8:40 pm	2/2/18	Home	9:00	Auto	6 km	50/-	50/-
									<u>416/-</u>

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hall at special place.

Total claim Rs. 416/-

Signature

T/F

CERTIFICATE

Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the stipulated amount in the bill
- 4. I have not taken any advance for my expenses for the journey
- 5. If there is any audit objection and if there is recovery and ready to refund the same
- 6. I have travelled for the specific work of the Institution and have completed the work for which I was sent to Dangamane Private Bus ticket not available

Signature of the claimant

[Handwritten Signature]

I have checked the T. A Bill of this

The amount claimed by him may please be passed for payment to Rs.

Accountant

[Handwritten Signature]

Approved and passed for payment of Rs.

Principal

Stamp & Signature of the

claimant

[Handwritten Signature]

Received the amount of Rs. one thousand four hundred sixteen Ru only

Padmashri Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY AHEMDNAGAR
TRAVELLING ALLOWANCE BILL

forward
geography

1) Name and Designation: Sandip A. Hopse Date: 2/2/18
 2) Basic Pay Rs: 24,500/-
 3) Purpose of journey and order No: National level workshop: Sangamner.
 Asst. Professor

Date	From		To		Mode of conveyance i.e., by Rail / S.T. / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time of departure	Date	Place				
2/2/18	Home	6:00 am	2/2/18	Nagpur BST	Auto	6 km	50/-	50/-
2/2/18	Nagpur BST	6:45 am	2/2/18	Sangamner BST	private	100 km	108/-	108/-
2/2/18	Sangamner BST	9:45 am	2/2/18	ACOP. Sang.	Auto	6 km	50/-	50/-
2/2/18	ACOP. Sang.	5:15 pm	2/2/18	Sang. BST	Auto	6 km	50/-	50/-
2/2/18	Sang. BST	5:45 pm	2/2/18	Nagpur BST	private	100 km	108/-	108/-
2/2/18	Nagpur BST	8:45 pm	2/2/18	Home	Auto	6 km	50/-	50/-
								<u>416/-</u>

Add - 1) Daily Allowance at ordinary rate at Rs. _____ per day for _____ days i. o. for _____ hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ hours at special place.

Total claim Rs. 416/- 416/- 832/-
 + 600/- Registration fee - 600/-
832/-
1432/-
S. Pan

[Signature]
Signature



CERTIFICATE

Certified that -

- 1. I have travelled by the shortest route
- 2. By the class / mode of conveyance for which I am entitled
- 3. The actual expenditure incurred by me is not less than the amount claimed amount in the bill
- 4. I have not taken any advance for my journey
- 5. If there is any audit objection and if there is recovery I am ready to refund the same
- 6. I have travelled for the specific work of the institution and have completed the work for which I was sent to Bangalore.

Private Bus - Ticket Not Available
 Signature of the claimant
 [Signature]

I have checked the T. A Bill of shri. Prof. Hase S. A.

The amount claimed by him may please be passed for payment to Rs. 832 + 600 = 1432/- (One thousand four hundred and thirty two only)

Accountant
 [Signature]

Approved and passed for payment of Rs. [Signature]

Principal

Received the amount of Rs. one thousand sixteen P. only

Stamp & Signature of the claimant

[Signature]

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

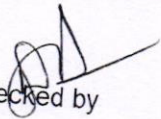
Cash Payment Voucher

No. : 314

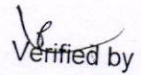
Dated : 25-Oct-2017

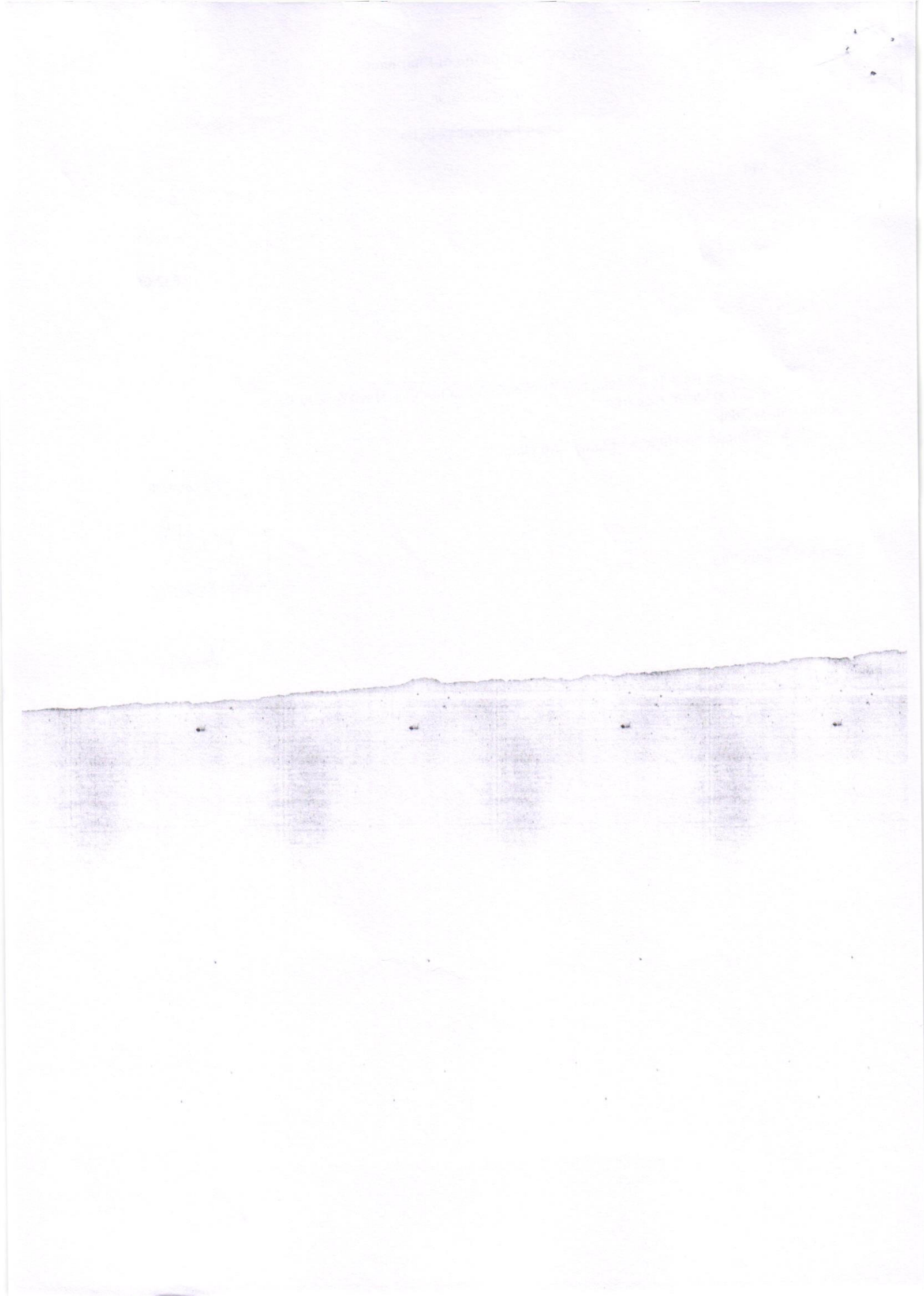
Particulars	Amount
Account : Travelling Exps - Staff	682.00
Through : Cash	
On Account of : Being Amount Paid To Mhaske N.S Against T.A D.A For One Day Work At Punn As Per Office Order Attached.	
Amount (in words) : Indian Rupees Six Hundred Eighty Two Only	
	Rs. 682.00

Receiver's Signature:

Checked by 


Authorised Signatory

Verified by 



RECEIPT

Date : 25/10/2017

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2017

Drawn on

Bill no.....Dated / / 2017

On Account of T.A. 682L

Rs. 682L

Sign :



Name : Prof. N.S. Mhaske.

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

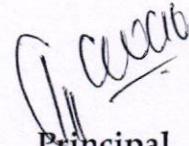
Ref. No. Coph/Esstt./2017/1306

Date : 06/10/2017.

:: OFFICE ORDER ::

Prof. N.S. Mhaske (Asstt. Professor) is deputed to Pune, on 14th October, 2017, for official work, regarding to attend one days workshop, at Dr. D.Y.Patil Institute of Pharmaceutical Sciences and Research, Pimpri, Pune.

He is entitled for T.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to:

1) Prof.N. S. Mhaske

2) Esstt. Section

3) A/c. Section.



Dr. D. Y. Patil Institute of Pharmaceutical Sciences and Research
Pimpri, Pune - 411 018 (Maharashtra) INDIA

CERTIFICATE OF PARTICIPATION

This is to certify that Dr. / Mr. / Mrs. / Ms. **NILESH S. MHASKE** has participated in One Day Workshop on "QbD Approach for Pharmaceutical Development - The Road Ahead" conducted on 14th October 2017 as a Resource Person / Delegate. His / Her participation in this program is highly appreciated.

Dr. Asha B. Thomas
Co-Ordinator

Dr. Sohan S. Chitlange
Principal & Convenor

COLLEGE OF PHARMACY AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

1) Name and Designation: Mr. N. S. Mhaske Date: 23/10/2017
Asst. Professor 2) Basic Pay Rs: _____
 3) Purpose of journey and order No. One day workshop [1306]

From			To			Mode of conveyance i.e, by Rail/S,T, / Road / by hired / owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time of departure	Date	Place	Time of arrival				
14/10/2017	Home	7:00 am	14/10/2017	Ahmednagar Bus Stand	7:15 am	10 Km	20/-	10	
14/10/2017	Ahmednagar Bus Stand	7:20 am	14/10/2017	Pune Bus Stand	9:15 am	120 Km	181/-		
14/10/2017	Pune Bus Stand	9:20 am	14/10/2017	Pimpri Chinchwad College	10:15 am	35 Km	50/-		
14/10/2017	Pimpri Chinchwad College	4:30 pm	14/10/2017	Pune Bus Stand	5:30 pm	35 Km	50/-		
14/10/2017	Pune Bus Stand	5:30 pm	14/10/2017	Ahmednagar Bus Stand	8:30 pm	120 Km	181/-		
14/10/2017	Ahmednagar Bus Stand	8:30 pm	14/10/2017	Home	9:00 pm	10 Km	20/-		

Add :- 1) Daily Allowance at ordinary rate at Rs. 180/- per day for 1 days i. e. for 1 hours absence from the place of Head Quarter.

2) Difference between D.A. at ordinary and special rate at Rs. _____ per day for _____ halt at special place.

Total claim Rs. 682/-

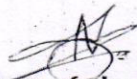
[Signature]
Signature

CERTIFICATE

Certified that —

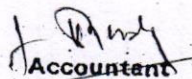
39

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled,
- 3) The actual expenditure incurred by me is not less than that claimed amount in the bill
- 4) I have not taken any advance (of Rs..... ..) for this journey
- 5) If there is any audit objection and if there is recovery, I am ready to refund the same
- 6) I have travelled for the specific work of the Institution and have completed the work for which I was sent to _____

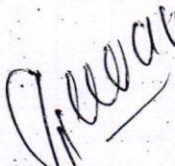

Signature of the claimant

I have checked the T. A Bill of shri _____

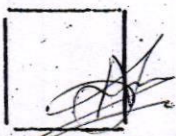
_____ The amount claimed by him may please
be passed for payment fo Rs. 6821


Accountant

Approved and passed for payment of Rs. 6821


Principal

Received the amount of Rs. 6821


Stamp & Signature of the
claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

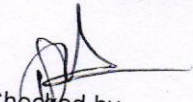
Cash Payment Voucher

No. : 307

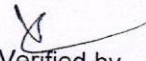
Dated : 24-Oct-2017

Particulars	Amount
Account : Seminar Exps	100.00
Through : Cash	
On Account of : Being Amount Paid To Mhaske N.S Against Registration Fee Of One Day Work Shop At Pune As Per sanction & Receipt Attached.	
Amount (in words) : Indian Rupees One Hundred Only	
	Rs. 100.00

Receiver's Signature:


Checked by


Authorized Signatory


Verified by

RECEIPT

Date: 24/10/2017

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees One Hundred Rupees only

In cash/By Cheque/D.D.No..... Dated / / 2017

Drawn on

Bill no..... Dated / / 2017

On Account of Seminar Exp.

Rs. 100/-

Sign: 

Name: Prof. N.S. Mhaske

Application letter

44

DT = 24/10/2017

To,

The Principal,
College of Pharmacy,
A. Nagar.

Subject: Issue Payment for Registration

Respected Sir,

I Prof. N.S. Mhaske was appointed for participation in One Day Workshop on QbD Approach for Pharmaceutical Development. On 4th October 2017.

So, the registration of Rs 100/- was done at the counter.

Thanking You,

AIC

Sanctioned Rs. 100/-
(100006)
24/10/17

Yours Sincerely,
Prof. N.S. Mhaske

9890207724.

CASH VOUCHER

No.

43

Date

14/10/17

₹

100/-

Pay to

Mr. Nilesh Mahske.

Dr. DYP IPSR Pimpri Pune


Rs. in Words

Hundred Rupees Only

being

and debit

Authorised by



Recd. above sum of ₹

100/-

Receiver's
Signature



Paid by Cash Drawn on Bank
or
 Cheque

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

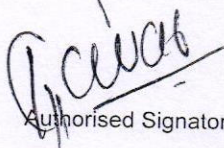
No. : 375

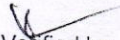
Dated : 22-Nov-2018

Particulars	Amount
Account : Travelling Exps-Staff	735.00
Through : Cash	
On Account of : Being amount paid to Shri Tadgkar P B for travelling at Pune for office work as per sanctioned.	
Amount (in words) : Indian Rupees Seven Hundred Thirty Five Only	
	Rs. 735.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: / / 2018

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2018

Drawn on

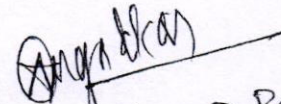
Bill no.....Dated / / 2018

On Account of

Rs. 735

Sign :

Name :


P. B. Patil

Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY, AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Name and Designation P.B. Jagadkar 2) Basic Pay Rs: _____ Date 22/11/2018
(Gr. clerk) 3) Purpose of Journey and order No _____

Date	From		To		Mode of Conveyance i.e By Rail /S.T./ Road / by hired/ Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time Of Departure	Date	Place				
21/11/18	College	06.30am	21/11/18	Ahmednagar	Auto	8	9	10
21/11/18	Ahmednagar	07.00 am	21/11/18	Pune	ST	120	50	
24/11/18	Pune	10.20 am	21/11/18	University	Auto	10	155	
21/11/18	University	04.00pm	21/11/18	Pune	Auto	10	100	
21/11/18	Pune	05.30pm	21/11/18	Ahmednagar	ST	120	100	
21/11/18	Ahmednagar	09.10pm	21/11/18	College	Auto	15	155	
							DA - 125	
							735/-	

Add :- 1) Daily Allowance at ordinary rate at Rs 125/- per day for 0/ days i.e for 12 hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at
Special Place

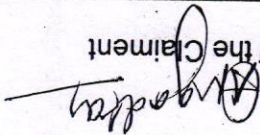
Total claim Rs 735/-

P.B. Jagadkar
Signature

CERTIFICATE


Certified that -

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount in the bill
- 4) I have not taken any advance (of Rs Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to

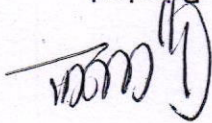
Signature of the Claimant


I have Checked the T.A. Bill of Shri P.B. Jagadkar

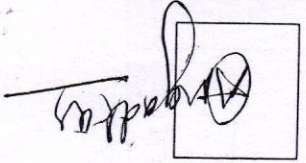
The Amount Claimed by him may please be Passed For Payment of Rs. ₹35/-

Accountant


Approved and passed for payment of Rs ₹35/-

Principal


Received the amount of Rs ₹35/-

Stamp & Signature of the Claimant


Claimant

श.रा.जी.न.म.
रा.प. तीरकपुर आगर
क्र: ००५/२१/१८
वस.क्र. : २४५२
वस.ची.वै. : ०७:००
सीट नं. : ००
अहमदनगर

5111012349 SEI

शिवाजीनगर पुणे

प्रस्तावित एकूण टक्के - २०.३८००००
कुल: ₹ १५५.००

श.रा.जी.न.म.
अ.व.नि.भी.सहित
₹ १५५.००
क्र: ००५/२१/१८
श.रा.जी.न.म.

5111012349 SEI



सावित्रीबाई फुले पुणे विद्यापीठ विद्यार्थी विकास मंडळ दिव्यांग सोयीसुविधा नियोजन बैठक उपस्थिती प्रमाणपत्र

डॉ. आर. एल. सावंत व डॉ. पी. बी. तागडकर

डॉ. विठ्ठलराव विठ्ठे पारेल कॉडिशनचे औषधनिर्माणशास्त्र
महाविद्यालय, विठ्ठे घाट, अहमदनगर.

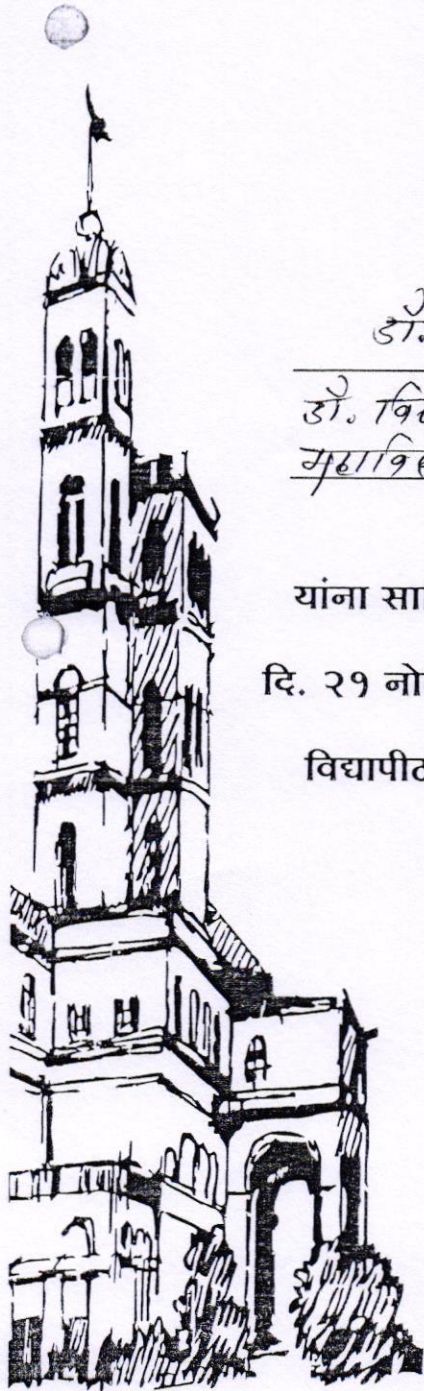
यांना सावित्रीबाई फुले पुणे विद्यापीठ, विद्यार्थी विकास मंडळ आयोजित
दि. २१ नोव्हेंबर २०१८ रोजी, संत नामदेव सभागृह, सावित्रीबाई फुले पुणे
विद्यापीठ या ठिकाणी या 'दिव्यांग सोयीसुविधा नियोजन बैठकीमध्ये'

उपस्थित राहिल्याबद्दल सदर उपस्थिती प्रमाणपत्र

प्रदान करण्यात येत आहे.



डॉ. प्रभाकर देसाई
संचालक
विद्यार्थी विकास मंडळ



Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

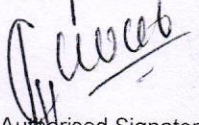
Cash Payment Voucher

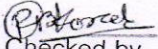
No. : 420

Dated : 24-Dec-2018

Particulars	Amount
Account : Travelling Exps-Staff	730.00
Through : Cash	
On Account of : Being amount paid to Shri Ambekar A W for travelling at Pune for office work as per sanctioned.	
Amount (in words) : Indian Rupees Seven Hundred Thirty Only	
	Rs. 730.00

Receiver's Signature:


Authorised Signatory


Checked by

Verified by

RECEIPT

Date : / / 2018

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2018

Drawn on

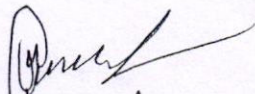
Bill no.....Dated / / 2018

On Account of

Rs. 730/-

Sign :

Name :


Ambekar A. W

म.रो.मा.प.म

रा. प. औरंगाबाद आगर

क्र. ०००१३६ २०/१३/१८१८०३७/१३

शिवशाही E००००००७/१८५६६६

शिवाजीनगर पुणे ते

तारकपुर

(प्रवासाचे एकूण टप्पे २०) संपूर्ण

फुल: ₹ २३३५.०० = ₹ २३३५.००

अ.स.निधी सहित

वस्तु व सेवाकर सहित

₹ २३५.००

ARG०२०० २०१५३२ v k Mahapatra
महस्तातरीणीय २०३६९११२०४

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

Ref. No. Coph/Esstt./2018/1604

Date : 22/12/2018.

:: OFFICE ORDER ::

Prof. A.W. Ambekar (Asstt.Prof.) was deputed to Pune, on 20th December, 2018, for official work (Regarding to attend one day workshop), at Allana College of Pharmacy, Pune.

He is entitled for T.A. only as per rule.

G. A. Ambekar

Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. A.W. Ambekar

2) Esstt. Section

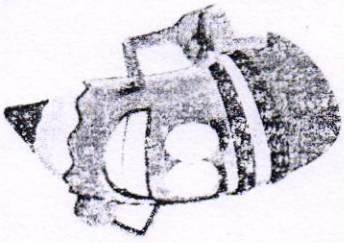
3) A/c. Sect.



One Day National Level Faculty Training Workshop on
"TEACHING WITH ANIMATIONS"
Jointly organized by
MCE Society's Allana College of Pharmacy, Pune-411 001
&



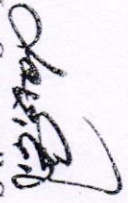
Association of Pharmacy Teachers of India, Maharashtra Branch (APTI-MS)




Certificate

This is to certify that Prof./Dr./Mr./Ms. AMBEKAR ABDUL WAHID
has participated as delegate/ Volunteer in One Day National Level Faculty Training
Workshop on "TEACHING WITH ANIMATIONS" held on 20th December 2018 at MCE Society's
Allana College of Pharmacy, Pune.




Mr. Swapnil S. Dounde
Co-ordinator


Dr. Kiran S. Bhise
Convener
Vice President (APTI-MS)


Dr. Chandrashekhar D. Upasani
President (APTI-MS)



COLLEGE OF PHARMACY, AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Dr. Vithalrao Vikhe Patil Foundation's

Name and Designation Amberkar Abdul Wahid 2) Basic Pay Rs: 18,600/- Date 21/12/2018

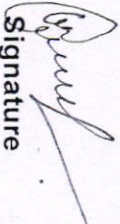
Asst. Professor 3) Purpose of Journey and order No To attend workshop at Ahmednagar, Pune.

From			To			Mode of Conveyance i.e By Rail / S.T. / Road / by hired / Owned conveyance	Distance Km.	Rate of fare or kilometreage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
20/12/18	Home	6.00 A.m	20/12/18	Kopergaon B.S	6.20 A.m	Auto	05	60	60
20/12/18	Kopergaon B.S	6.30 A.m	20/12/18	Pune B.S	9.40 A.m	Bus (Pvt)	120	235	235
20/12/18	Pune B.S	9.50 A.m	20/12/18	Ahmednagar COP	10.15 A.m	Auto	06	70	70
20/12/18	Ahmednagar COP	5.15 P.m	20/12/18	Pune B.S	5.45 P.m	Auto	06	70	70
20/12/18	Pune B.S	6.00 P.m	20/12/18	Kopergaon B.S	9.30 P.m	Bus	120	235	235
20/12/18	Kopergaon B.S	9.30 P.m	20/12/18	Home	9.45 P.m	Auto	05	60	60
730/-									730/-

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at Special Place

Total claim Rs 730/-

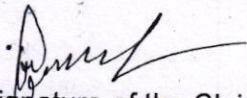

Signature

CERTIFICATE

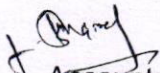
46

Certified that –

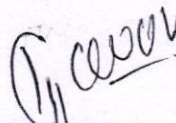
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs _____ Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to
one side ticket not received, because of Private Bus.


Signature of the Claimant

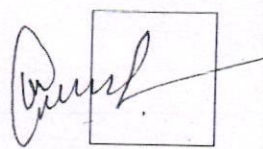
I have Checked the T.A. Bill of Shri Ambekar Abdul Usheed
_____ The Amount Claimed by him may please be
Passed For Payment of Rs. 730/-


Accountant

Approved and passed for payment of Rs 730/-


Principal

Received the amount of Rs 730/-


Stamp & Signature of the
Claimant

2019-20

Cash Payment Voucher

No. : 303

Dated : 18-Sep-2019

Particulars	Amount
Account : Misc Expenses	535.00
Rs. 535.00	

Through :

Cash

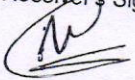
On Account of :

Being cash paid to Prof. Ambekar A.W. sir for registration fee of Animation Workshop at Allana college of Pharmacy, Pune held on 20.12.2018 amount paid on 18.09.2019 as per sanction

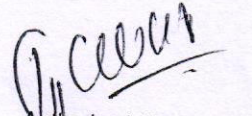
Amount (in words) :

Indian Rupees Five Hundred Thirty Five Only

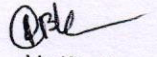
Receiver's Signature:



Checked by



Authorised Signatory



Verified by

RECEIPT

Date: 18/09/2019

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees *Five Hundred Thirty Five*

In cash/By ~~Cheque~~/D.D. No. *Cash* Dated 18/09/2019

Drawn on

Bill no..... Dated / /2019

On Account of

Rs. *535/-*

Sign: *[Signature]*
Name: *Ambekar A-cu*

Date: 24/12/18

To,
The Principal
Dr. V.V.P.F's
College of Pharmacy.
Ahmednagar.

Subject:- Regarding sanction of Bill.

Respected Sir,

With reference to the above mentioned subject, I request you to kindly sanction Rs 535/- (Five Hundred Thirty Five only) against the registration fee for Animation Workshop and training held on 20/12/18 at Alloma College of Pharmacy, Pune.

Hoping for your sanction.

Thanking you.

Yours faithfully,
Ambekar A.W
Dept. of P.Centia.

Sanctioned
Saareed
24/12/2018

Academic Incharge
College of Pharmacy
Ahmednagar

AIC
sanctioned Rs. 535/-

(A.W.)
24/12/2018

Seller Username
Seller Email Address

acppune
knowledgepublication@gmail.com

Purchase Details

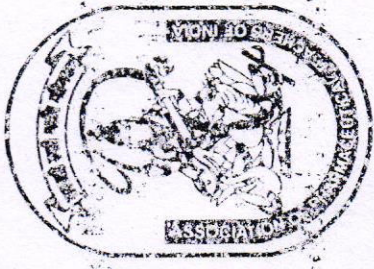
Payment ID
Buyer Name
Buyer Email Address
Buyer Phone Number
Purchase Date
Price
Quantity Purchased
Total Purchase Amount

MOJO8b15V05A54280532
Ambekar Abdul Wahid
wahidambekar@gmail.com
9371460020
Nov. 15, 2018
INR. 535.00
1
INR. 535.00

This charge will appear in your account statement as "Instamojo".

Powered by

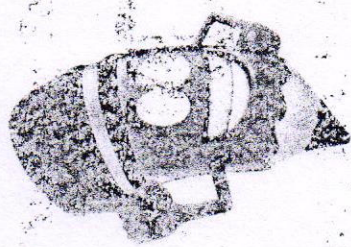




**One Day National Level Faculty Training Workshop on
TEACHING WITH ANIMATIONS**



Jointly organized by
M.C.E.S. Society's Allana College of Pharmacy, Pune-411 001



Association of Pharmacy Teachers of India, Maharashtra Branch (APTI-MS)

Certificate


This is to certify that Prof./Dr./Mr./Ms AMBEKAR ABDUL WAHID

has participated as delegate/ Volunteer in One Day National Level Faculty Training
Workshop on **TEACHING WITH ANIMATIONS** held on 20th December 2018 at MCE Society's

Allana College of Pharmacy, Pune.


Mr. Swapnil B. Bhowade
Coordinator


Dr. Kiran S. Bbise
Convener


Dr. Chandrashekhar D. Upasani
President (APTI-MS)

Vice President (APTI-MS)

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

Ref. No. Coph/Esstt./2018/1604

Date : 22/12/2018.

:: OFFICE ORDER ::

Prof. A.W. Ambekar (Asstt.Prof.) was deputed to Pune, on 20th December, 2018, for official work (Regarding to attend one day workshop), at Allana College of Pharmacy, Pune.

He is entitled for T.A. only as per rule.

A.W. Ambekar

Principal
College of Pharmacy,
Ahmednagar.

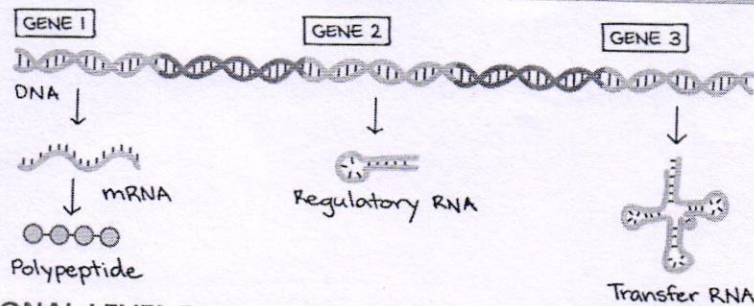
Copy to :

1) Prof. A.W. Ambekar

2) Esstt. Section

3) A/c. Sect.

Interactive animations



ONE DAY NATIONAL LEVEL FACULTY TRAINING WORKSHOP ON

'Teaching with Animations''

Jointly Organized by

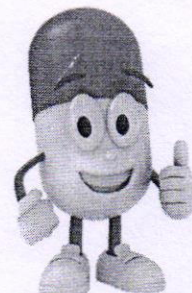
MCE Society Allana College of Pharmacy, Pune &

Association of Pharmacy Teachers of India Maharashtra Branch (APTI-MS)

Highlights:

- ★ Subject wise Demonstration and actual practice on creating animations.
- ★ Animation software will be distributed to registered delegates.
- ★ Online resources for study materials, animations on various subjects.
- ★ Creating an YouTube video channel.
- ★ Working with PREZI an advanced slide show presentation software.
- ★ Working on video making software.
- ★ Use of social media in effective teaching.

Venue: MCE Society Allana College of Pharmacy
Azam Campus, Camp, PUNE-411001



Resource Person: Dr. Anwar R. Shaikh (Professor & HOD, Allana College of Pharmacy, Pune)

Date: 20th DEC, 2018 For All Subjects.

Registration will be limited to 50 delegates. Training certificates will be given to registered delegates.

Registration charges: Rs. 500*/-

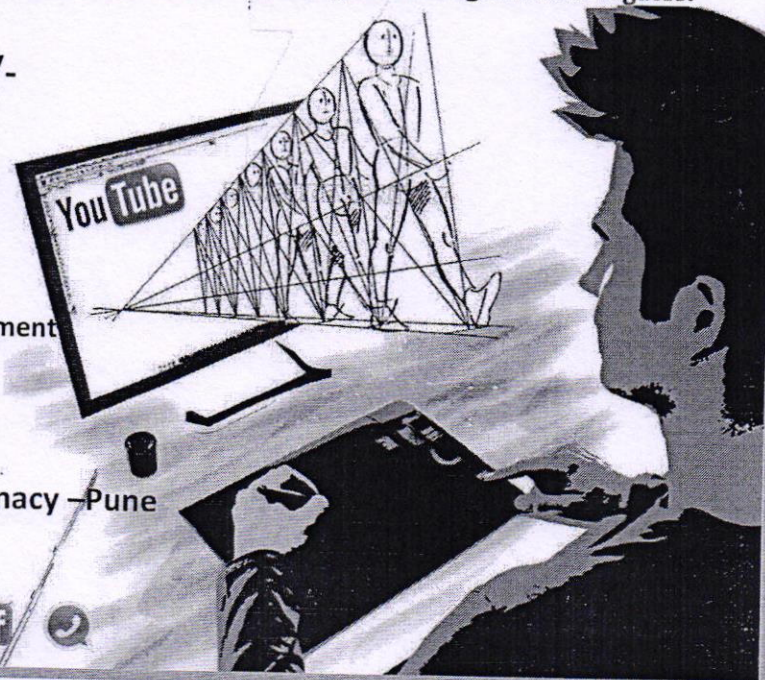
*(Excluding online bank charges)

- ★ Link for Payment:
<https://goo.gl/G5FCWU>

Registration will be incomplete without payment

For Details contact:

- 1) Dr. K.S.Bhise, Principal & Professor,
MCE Society Allana College of Pharmacy -Pune
prin-acpharm@azamcampus.org
- 2) knowledgepublication@gmail.com
+91-9420469659



The first part of the report deals with the general situation of the country and the progress of the work during the year. It is followed by a detailed account of the various projects and the results achieved. The report concludes with a summary of the work done and a list of the publications issued during the year.

The second part of the report deals with the financial statement of the institution for the year. It shows the income and expenditure and the balance sheet at the end of the year. The report also contains a list of the names of the members of the institution and the names of the staff who have worked during the year.

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

Dated : 17-Jan-2019

No. : 475+

Particulars	Amount
Account : Misc Expenses	535.00

Through :

Cash

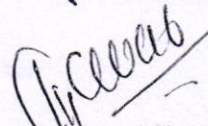
On Account of :

Being amount paid to Miss J B Wadekar for registration fees as per sanctioned.

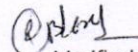
Amount (in words) :

Indian Rupees Five Hundred Thirty Five Only

Rs. 535.00


Authorised Signatory

Receiver's Signature:


Verified by

Checked by

RECEIPT

Date : 17/1/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 535/-

Sign :



Name : J.B. Wadekar

10.1.2018/2019.

To,
Principal,
Dr. V.V.P.F's College of Pharmacy,
Vilad Ghod, A'nagar.

Applicant : Prof. Jyoti B. Wadekar
Dept. of Pharmacology.

Respected Sir,

As stated in above subject, I the above mentioned applicant was deputed to Pune to attend one day work on "Teaching with animations" organized by Allana College of Pharmacy Pune on 20th Dec. 2018. This is in kind request to sanction the expenditure incurred towards the same, registration fees.

Del for workshop of Rs. 535/-

Hoping for your kind consideration.

Thanking You.

AIC
Sanctioned Rs. 535/-

(Jyoti B. Wadekar)
17/1/2019

Yours Truly

(J.B. Wadekar)

Seller Username	acppune
Seller Email Address	knowledgepublication@gmail.com

Purchase Details

Payment ID	MOJ08b20W05A45377810
Buyer Name	Jyoti Wadekar
Buyer Email Address	jyotsfriend21@gmail.com
Buyer Phone Number	9511750361
Purchase Date	Nov. 20, 2018
Price	INR. 535.00
Quantity Purchased	1
Total Purchase Amount	INR. 535.00

This charge will appear in your account statement as "Instamojo".

Powered by





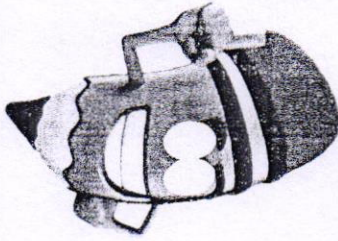
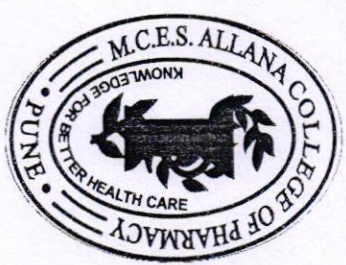
One Day National Level Faculty Training Workshop on
"TEACHING WITH ANIMATIONS"

Jointly organized by

MCE Society's Allana College of Pharmacy, Pune-411 001

&

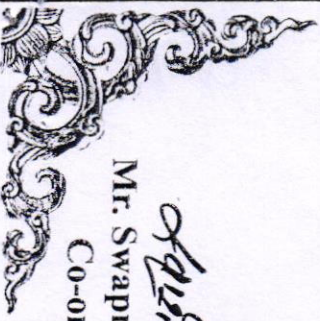
Association of Pharmacy Teachers of India, Maharashtra Branch (APTI-MS)



Certificate

This is to certify that Prof./ Dr./Mr./ Ms. MADEKAR JYOTI BALASAHEB

has participated as delegate/ Volunteer in One Day National Level Faculty Training Workshop on "TEACHING WITH ANIMATIONS" held on 20th December 2018 at MCE Society's Allana College of Pharmacy, Pune.



Mr. Swapnil S. Dounde
Co-ordinator

Dr. Kiran S. Bhise
Convener
Vice President (APTI-MS)

Dr. Chandrashekhar D. Upasani
President (APTI-MS)



2018-19

Cash Payment Voucher

No. : 463

Dated : 10-Jan-2019

Particulars	Amount
Account : Travelling Exps-Staff	670.00

Through :

Cash

On Account of :

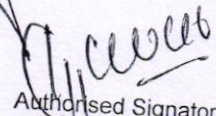
Being amount paid to Wadekar J B for travelling at Pune for office work as per sanctioned.

Amount (in words) :

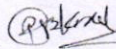
Indian Rupees Six Hundred Seventy Only

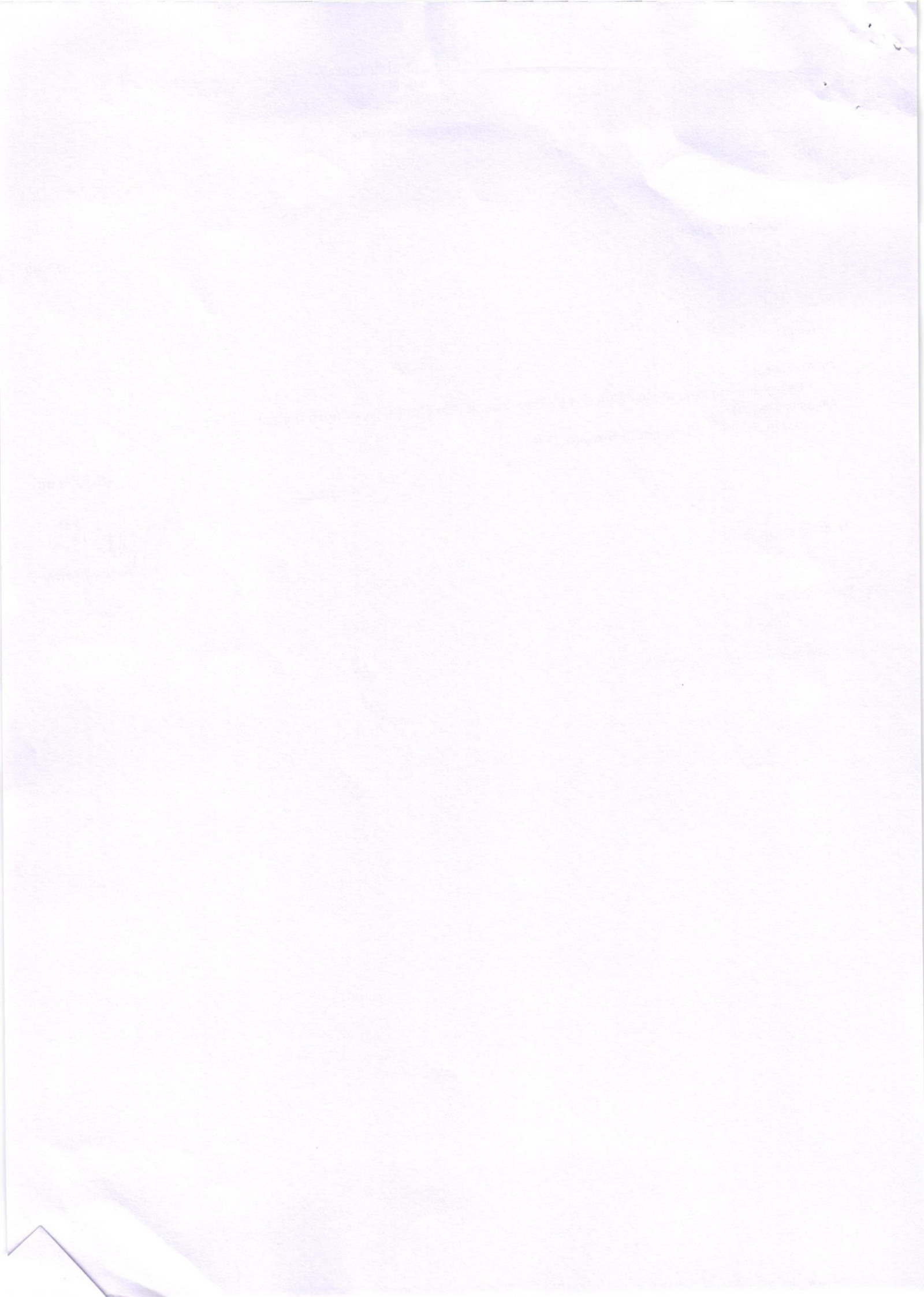
Rs. 670.00

Receiver's Signature:


Authorised Signatory

Checked by


Verified by



RECEIPT

Date : 10/01/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees


In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 670/-

Sign :  Jyoti B. Wadekar

Name :



Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

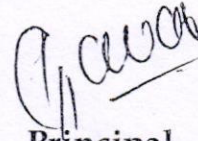
Ref. No. Coph/Esstt./2018/ 03

Date : 28/12/2018.

:: OFFICE ORDER ::

Prof. V.V.Nimbalkar, Prof. Ms. J.B.Wadekar & Prof. M.A. Raskar (Asstt.Prof.) were deputed to Pune, on 20th December, 2018, for official work (Regarding to attend one day workshop), at Allana College of Pharmacy, Pune.

They are entitled for T.A. only as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. V.V.Nimbalkar 2) Prof. J.B.Wadekar 3) Prof.M.A.Raskar 4) Esstt. Section 5) A/c. Sect.

Dr. Vithalrao Vrikhe Patil Foundation's

COLLEGE OF PHARMACY, AHMEDNAGAR TRAVELLING ALLOWANCE BILL

Name and Designation Prof. Jyoti B. Madekar

2) Basic Pay Rs: 20300

Date 10/10/2019

Asst Prof

3) Purpose of Journey and order No One day animation workshop

Order No. COPL/522/2018/03

From			To			Mode of Conveyance i.e By Rail / S.T. / Road / by hired / Owned conveyance	Distance Km.	Rate of fare or kilometreage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
20/12/18	Vilad chav	6:00am	20.12.18	Ahmednagar stand	6:30am	Auto	20km	50/-	50/-
20/12/18	Ahmednagar stand	6:45am	20.12.18	Pune stand	9:15am	S.T	120km	235/-	235/-
20/12/18	Pune stand	9:20am	20.12.18	Allamra COP	9:40am	Auto	20km	50/-	50/-
20/12/18	Allamra COP	5:30pm	20.12.18	Pune stand	5:55pm	Auto	30km	50/-	50/-
20/12/18	Pune stand	6:00pm	20.12.18	Ahmednagar stand	9:20pm	S.T.	120km	235/-	235/-
20/12/18	Ahmednagar stand	9:30pm	20.12.18	Home	10:00pm	Auto	20km	50/-	50/-

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at
Special Place

Total claim Rs 670/-

Signature

47

CERTIFICATE

Certified that –

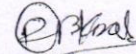
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to



Signature of the Claimant

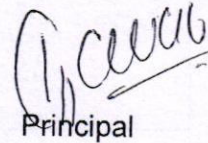
I have Checked the T.A. Bill of Shri J. B. Wadkar

_____ The Amount Claimed by him may please be
Passed For Payment of Rs. 670/-

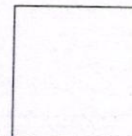


Accountant

Approved and passed for payment of Rs 670/-


Principal

Received the amount of Rs 670/-



Stamp & Signature of the
Claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 466

Dated : 11-Jan-2019

Particulars	Amount
Account : Travelling Exps-Staff	610.00
Misc Expenses	535.00

Through :

Cash

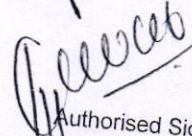
On Account of :

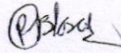
Being amount paid to Shri V V Nimbalkar for travelling at Pune for official work and reg fees charges workshop paid as per sanctioned.

Amount (in words) :

Indian Rupees One Thousand One Hundred Forty Five Only

Rs. 1,145.00


Authorised Signatory


Verified by

Receiver's Signature:

Checked by

RECEIPT

Date : 11/01/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

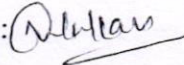
In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 11451 -

Sign : 

Name : Vilasem V. Nimbalkar

TO,

10/01/2018

Principal

DVVVPE's College of Pharmacy
Nilad Ghat, Anagav.

Applicant:- Mr. Vikram V. Nimbalkar
Dept. of Pharmacology

Subject:- Regarding sanction of Expenditure for the
workshop.

Respected Sir,

As stated in above subject, the above
mentioned applicant was deputed to Pune to attend
One day work on "Teaching with animations"
organized by Allana College of Pharmacy, Pune on
20th Dec 2018. This is in kind request to sanction
the expenditure incurred towards the same.

Details of expenditure is as follows:-

- 1) Registration fee for workshop:- Rs 535
- 2) TA as per rule :- Rs 610

Total :- Rs 1145/-

Rupers one thousand one hundred forty five only.

Hoping for your kind consideration.

Thanking you,

AIC
Sanctioned Rs. 1145/-

Yours Sincerely
V. Nimbalkar
VUNimbalkar

(1)
11/01/2019

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

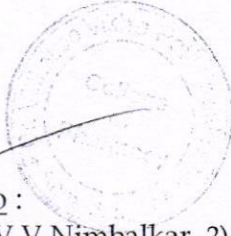
Ref. No. Coph/Esstt./2018/03

Date : 28/12/2018.

:: OFFICE ORDER ::

Prof. V.V.Nimbalkar, Prof. Ms. J.B.Wadekar & Prof. M.A. Raskar (Asstt.Prof.) were deputed to Pune, on 20th December, 2018, for official work (Regarding to attend one day workshop), at Allana College of Pharmacy, Pune.

They are entitled for T.A. only as per rule.



(Signature)
Principal

College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. V.V.Nimbalkar 2) Prof. J.B.Wadekar 3) Prof.M.A.Raskar 4) Esstt. Section 5) A/c. Sect.



vikram nimbalkar <rajevikram@gmail.com>

Change in Schedule of Workshop on Teaching with Animations from 18th Dec. 2018 to 20th December 2018.

3 messages

Dr. Anwar R. Shaikh <knowledgepublication@gmail.com>

Wed, Dec 5, 2018 at 4:16 PM

To: sana kausar <sk.sana002@gmail.com>, Hiteshkumar Agrawal <agrawal.hiteshkumar@gmail.com>, rakesh_2504@yahoo.co.in, Minal Chaudhari <minalchaudhari78@gmail.com>, Atul Deshmukh <prof.adeshmukh@gmail.com>, tanajinandgude@gmail.com, rajevikram@gmail.com, surajshival007@gmail.com, Wahid Ambekar <wahidambekar@gmail.com>, Manish Raskar <manish.raskar@gmail.com>, mahesh marathe <maheshmarathe218@gmail.com>, Sonali Raut <sonali.march26@gmail.com>, shubhangi pawar <srpawar199222@gmail.com>, idraut7363@gmail.com, Dipak Gumate <dipakgumate@gmail.com>, Shiwali Sharma <shiwali.sharma@gmail.com>, Jyotsna Patil <jyotsna.patil04@gmail.com>, rupali barhate <rupali.barhate2020@gmail.com>, vakare.suvarna@gmail.com, desalepr@rediffmail.com, suresh sudke <sureshsudke@gmail.com>, Sharwaree Hardikar <sharwareehardikar@gmail.com>, kashidvivek@rediffmail.com, vikas_shende2003@yahoo.co.in, pratiksha8187@gamil.com, faiza.shaikh@hkcp.edu.in

Dear sir/Madm,

This is for your kind information that the workshop on Teaching with animations which was previously scheduled on 18th December 2018 has been shifted to 20th December 2018 due to some technical problems.

Kindly note the same and make it convenient to attend the same workshop on 20th December 2018.

We are very much thankful for your cooperation.

Regards,

Dr. Anwar Shaikh

09420469659



Knowledge Publications

Success is a journey and not a destination

www.knowledgepublications.webs.com (Click Here to Know more)

vikram nimbalkar <rajevikram@gmail.com>

Wed, Dec 5, 2018 at 4:17 PM

To: "Dr. Anwar R. Shaikh" <knowledgepublication@gmail.com>

Cc: sana kausar <sk.sana002@gmail.com>, Hiteshkumar Agrawal <agrawal.hiteshkumar@gmail.com>, rakesh_2504@yahoo.co.in, Minal Chaudhari <minalchaudhari78@gmail.com>, Atul Deshmukh <prof.adeshmukh@gmail.com>, tanajinandgude@gmail.com, surajshival007@gmail.com, Wahid Ambekar <wahidambekar@gmail.com>, Manish Raskar <manish.raskar@gmail.com>, mahesh marathe <maheshmarathe218@gmail.com>, Sonali Raut <sonali.march26@gmail.com>, shubhangi pawar <srpawar199222@gmail.com>, idraut7363@gmail.com, Dipak Gumate <dipakgumate@gmail.com>, Shiwali Sharma <shiwali.sharma@gmail.com>, Jyotsna Patil <jyotsna.patil04@gmail.com>, rupali barhate <rupali.barhate2020@gmail.com>, vakare.suvarna@gmail.com, desalepr@rediffmail.com, suresh sudke <sureshsudke@gmail.com>, Sharwaree Hardikar <sharwareehardikar@gmail.com>, kashidvivek@rediffmail.com, vikas_shende2003@yahoo.co.in, pratiksha8187@gamil.com, faiza.shaikh@hkcp.edu.in

Thanks for informing.

[Quoted text hidden]

Mail Delivery Subsystem <mailer-daemon@googlemail.com>

Wed, Dec 5, 2018 at 4:17 PM

To: rajevikram@gmail.com

Address not found



ONE DAY NATIONAL LEVEL FACULTY TRAINING WORKSHOP ON

"Teaching with Animations"

Jointly Organized by

MCE Society Allana College of Pharmacy, Pune

&

Association of Pharmacy Teachers of India Maharashtra Branch
(APTI-MS)



Registration Form

(18/12/2018) For Pharmaceutics and Pharmacology Teaching Faculty

(Valid only after successful online payment)

Registration charges includes: Seminar, Demonstration, Training, Animation softwares, Practice on allotted PC, Hospitality and Certificate of attendance.

Link for Online Payment: <https://goo.gl/G5FCWU>

Mr./Miss/Mrs./Dr. VIKRAM VINAYAK NIPBALKAR
 First Name Middle Name Last name (Surname)

Designation: Asst. Professor Qualification: M. Pharm

APTI Membership No. _____ Specialization: P'ceutics/P'Cology
 (if member)

Organization/Affiliation: D.V.V.P.'s college of pharmacy

Address: Vilad Ghat, Ahmednagar

City: Ahmednagar Postal code: 414111

Contact No. 1) 9970072233 2) _____

Email: rajevikram@gmail.com

Signature: [Signature]

Date: 15/11/2018

[Signature]
 Sign. Of Principal



D.V.V.P.'s College of Pharmacy
 Vilad Ghat, Ahmednagar

(Seal of Institute)

Send dully filled and scanned form (soft copy) to (1) prin-acpharm@azamcampus.org
 (2) knowledgepublication@gmail.com

Also bring original hard copy of registration form along of payment receipt mail (received on your email) on the day of workshop. For Inquiry contact: 9420469659

Seller Username
Seller Email Address

acppune
knowledgepublication@gmail.com

Purchase Details

Payment ID	MOJ08b15G05A54280092
Buyer Name	Vikram Nimbalkar
Buyer Email Address	rajvikram@gmail.com
Buyer Phone Number	9970072233
Purchase Date	Nov. 15, 2018
Price	INR. 535.00
Quantity Purchased	1
Total Purchase Amount	INR. 535.00

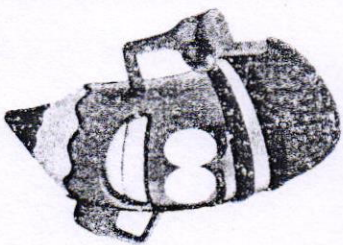
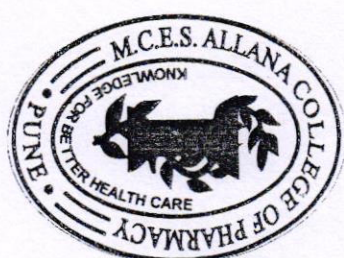
This charge will appear in your account statement as "Instamojo".

Powered by





One Day National Level Faculty Training Workshop on
"TEACHING WITH ANIMATIONS"
Jointly organized by
MCE Society's Allana College of Pharmacy, Pune-411 001
&



Certificate

This is to certify that Prof./ Dr./Mr./ Ms. Vikram V. Nimbalkar

has participated as delegate/ Volunteer in One Day National Level Faculty Training Workshop on "TEACHING WITH ANIMATIONS" held on 20th December 2018 at MCE Society's Allana College of Pharmacy, Pune.

Mr. Swapnil S. Dounde
Co-ordinator

Dr. Kiran S. Bhise
Convener
Vice President (APTI-MS)

Dr. Chandrashekhhar D. Upasani
President (APTI-MS)

COLLEGE OF PHARMACY, AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Dr. Vithalrao Vikhe Patil Foundation's

Name and Designation Prof. V.N. Nimbalkar Asst. Prof 2) Basic Pay Rs: 28,230/- Date 10/01/2019

3) Purpose of Journey and order No at Ahava copy Pune, copy/SSM/2018/103

From			To			Mode of Conveyance i.e By Rail / S.T. / Road / by hired / Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
20/12/18	07:00am	College Ahava	20/12/18	7:30am	Ahava	Auto	15	50	50
20/12/18	8:00am	Pune	20/12/18	11:00am	Pune	Private	125	155	155
20/12/18	11:00am	Pune	20/12/18	11:50am	Camp	Auto	15	100	100
20/12/18	5:00pm	Camp	20/12/18	5:30pm	Pune	Auto	15	100	100
20/12/18	6:00pm	Pune	20/12/18	8:30pm	Ahava	Private	125	155	155
20/12/18	5:30pm	Ahava	20/12/18	8:00pm	College	Auto	15	50	50
<u>610/-</u>									

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at
Special Place

Total claim Rs 610/-

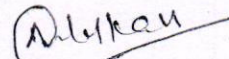
Dr. Vithalrao
Signature

CERTIFICATE

48

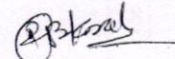
Certified that –

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to



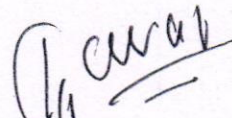
Signature of the Claimant

I have Checked the T.A. Bill of Shri Vilwan V Nimbalkar
_____ The Amount Claimed by him may please be
Passed For Payment of Rs. Six hundred and ten.



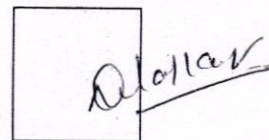
Accountant

Approved and passed for payment of Rs 610/-



Principal

Received the amount of Rs 610/-



Stamp & Signature of the
Claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 4787

Dated : 17-Jan-2019

Particulars	Amount
Account : Misc Expenses	535.00

Through :

Cash

On Account of :

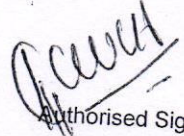
Being amount paid to Raskar M A for reg fees as per sanctioned.

Amount (in words) :

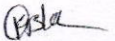
Indian Rupees Five Hundred Thirty Five Only

Rs. 535.00

Receiver's Signature:


Authorised Signatory

Checked by


Verified by

RECEIPT

Date : /2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

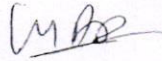
In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 535/-

Sign : 

Name : M.A. Raiskar

11/11/19

To,

The Principal,

Dr. VVPF's college of pharmacy,
Vilad ghat, Ahmednagar

Applicant;- Prof. M.A. Raskar

Subject;- To sanction expenditure of registration fee

Respected Sir,

As stated in above subject, myself Prof. Manish A. Raskar was deputed to Pune to attend one day workshop on "Teaching with Animation" organized by Allana college of pharmacy, Pune on 20th Dec 2019. This is in kind request to sanction the expenditure incurred towards registration fees for workshop of Rs. 535/-.

So please consider my application regarding same.

Thanking you,

Alc
Sanctioned Rs 535/-

Alc
17/11/2019

Yours truly,

M.A. Raskar
(M.A. Raskar)



ONE DAY NATIONAL LEVEL FACULTY TRAINING WORKSHOP ON
"Teaching with Animations"



Jointly Organized by

MCE Society Allana College of Pharmacy, Pune

&

Association of Pharmacy Teachers of India Maharashtra Branch
 (APTI-MS)

Registration Form

(20/12/2018) For Pharmaceutical Chemistry and Pharmacognosy Teaching Faculty

(Valid only after successful online payment)

Registration charges includes: Seminar, Demonstration, Training, Animation softwares, Practice on allotted PC, Hospitality and Certificate of attendance.

Link for Online Payment: <https://goo.gl/G5FCWU>

Mr./Miss/Mrs./Dr. Manish Asbok Raskar
 First Name Middle Name Last name (Surname)

Designation: Asst. Prof. Qualification: M. Pharm.

APTI Membership No. MA/LLM-1109 Specialization: P'Chem/P'Cqgnosy
 (if member)

Organization/Affiliation: Dr. VVP F's College of Pharmacy, A'Nagar

Address: Dr. VVP F's college of pharmacy, vilad ghat

City: Ahmednagar Postal code: 414111

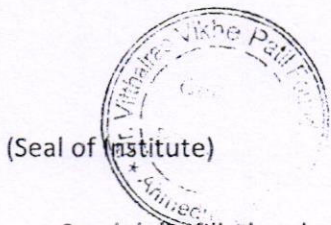
Contact No. 1) 9028757504 2) _____

Email: manish.raskar @gmail.com

Signature: [Signature]

Date: 19/11/18

[Signature]
 Dr. P.Y. Pawar
 Principal
 College of Pharmacy
 Vilad Ghat, Ahmednagar



Send dully filled and scanned form (soft copy) to (1) prin-acpharm@azamcampus.org
 (2) knowledgepublication@gmail.com

Also bring original hard copy of registration form along of payment receipt mail (received on your email) on the day of workshop. For Inquiry contact: 9420469659

Seller Username	acppune
Seller Email Address	knowledgepublication@gmail.com

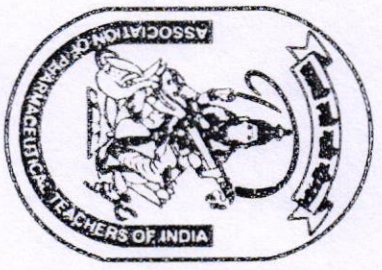
Purchase Details

Payment ID	MOJ08b15B05N54282870
Buyer Name	Manish Ashok Raskar
Buyer Email Address	manish.raskar@gmail.com
Buyer Phone Number	9028757504
Purchase Date	Nov. 15, 2018
Price	INR. 535.00
Quantity Purchased	1
Total Purchase Amount	INR. 535.00

This charge will appear in your account statement as "Instamojo".

Powered by

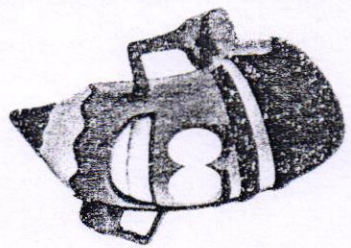




One Day National Level Faculty Training Workshop on
"TEACHING WITH ANIMATIONS"

Jointly organized by
MCF Society's Allana College of Pharmacy, Pune-411 001
&

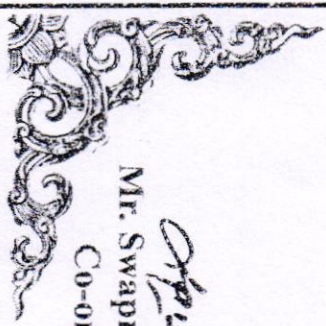
Association of Pharmacy Teachers of India, Maharashtra Branch (APTI-MS)



Certificate

This is to certify that Prof/ Dr/Mr/ Ms Mamish Ashok Raske
has participated as delegate/ Volunteer in One Day National Level Faculty Training

Workshop on "TEACHING WITH ANIMATIONS" held on 2nd December 2018 at MCF Society's
Allana College of Pharmacy, Pune.



Mr. Swapnil S. Dounde
Co-ordinator

Dr. Kisen S. Bhise
Convener
Vice President (APTI-MS)

Dr. Chandrashekhar D. Upasani
President (APTI-MS)



2018-19

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 461

Dated : 9-Jan-2019

Particulars	Amount
Account : Travelling Exps-Staff	670.00
Through : Cash	
On Account of : Being amount paid to Shri M A Raskar for travelling at Pune for office work as per sancitoned.	
Amount (in words) : Indian Rupees Six Hundred Seventy Only	
	Rs. 670.00

Receiver's Signature:

Authorised Signatory

Checked by

Verified by

RECEIPT

Date 09/01/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

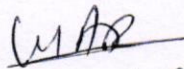
In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 670/-

Sign : 

Name : M.A. Raskar

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

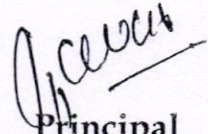
Ref. No. Coph/Esstt./2018/ 03

Date : 28/12/2018.

:: OFFICE ORDER ::

Prof. V.V.Nimbalkar, Prof. Ms. J.B.Wadekar & Prof. M.A. Raskar (Asstt.Prof.) were deputed to Pune, on 20th December, 2018, for official work (Regarding to attend one day workshop), at Allana College of Pharmacy, Pune.

They are entitled for T.A. only as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. V.V.Nimbalkar 2) Prof. J.B.Wadekar 3) Prof.M.A.Raskar 4) Esstt. Section 5) A/c. Sect.

म. रा. मा. प. म.
श. प. औरंगाबाद २ आगार

क्र: ०००११७ २०/१२/१८ १८:३७:४७
शिवाजी नगर पुणे
शिवाजीनगर पुणे तारकपुर

(प्रवासव एकूण टापो) ११५५६६
कुल: ₹ २३५.०० = ₹ २३५.००

अ. स. तिथी सहित
वस्तु व सेवाकर भरित
₹ २३५.००

ARG ०५२०४ ००८५३२ v k Mahapatra
अहस्तातरीण ००३५११२०४

5111

5111

5111012345

Dr. Vihalarao Vikhe Patil Foundation's
COLLEGE OF PHARMACY, AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Name and Designation Prof. Manish Ashok Rastkar 2) Basic Pay Rs: 18,000/- Date 01/01/2019

Asst. Prof.

3) Purpose of Journey and order No One day Animation workshop
order no - CoPh/Ekt/2018/03

From			To			Mode of Conveyance i.e By Rail/S.T./Road / by hired/ Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
20/12/18	Home	6.15 am	20/12/18	A'Nagar Stand	6.30 am	Auto	20 km	50/-	50/-
20/12/18	A'Nagar Stand	6.45 am	20/12/18	Pune Stand	9.00 am	S.T.	120 km	235/-	235/-
20/12/18	Pune Stand	9.10 am	20/12/18	Alana Cop	9.30 am	Auto	3.0 km	50/-	50/-
20/12/18	Alana Cop	5.00 pm	20/12/18	Pune Stand	5.30 pm	Auto	3.0 km	50/-	50/-
20/12/18	Pune Stand	5.45 pm	20/12/18	A'Nagar Stand	9.00 pm	S.T.	120 km	235/-	235/-
20/12/18	A'Nagar Stand	9.10 pm	20/12/18	Home	9.30 pm	Auto	20 km	50/-	50/-
Total = 670/-									

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at or dinaary and special rate at Rs _____ per day for _____ halt at
Special Place

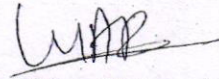
Total claim Rs 670/-

Signature [Signature]

CERTIFICATE

Certified that –

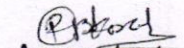
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to



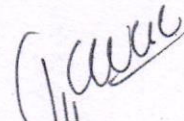
Signature of the Claimant

I have Checked the T.A. Bill of Shri M. A. Raskar

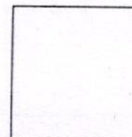
_____ The Amount Claimed by him may please be
Passed For Payment of Rs. 670/-


Accountant

Approved and passed for payment of Rs 670/-


Principal

Received the amount of Rs 670/-



Stamp & Signature of the
Claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 481

Dated : 18-Jan-2019

Particulars	Amount
Account : Travelling Exps-Staff	695.00
Rs. 695.00	

Through :

Cash

On Account of :

Being amount paid to Leena pathak for travelling at Pune for office work (Seminor) as per sanctioned.

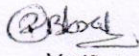
Amount (in words) :

Indian Rupees Six Hundred Ninety Five Only

Receiver's Signature:


Authorised Signatory

Checked by


Verified by

RECEIPT

Date : 18/07/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 695/-

Sign :



Name :

Patil L.P.

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

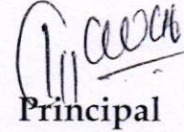
Ref. No. Coph/Esstt./2019/ 84

Date : 14/01/2019.

:: OFFICE ORDER ::

Prof. Mrs. L.P. Pathak (Asstt.Prof.) was deputed to Lonawala, on 10th and 11th January, 2019, for official work (Regarding to attend two days state level seminar) , at Sinhgad Institute of Pharmacy, Lonawala.

She is entitled for T.A. as per rule.


Principal

College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. Mrs. L.P. Pathak

2) Esstt. Section

3) A/c. Sect.

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.


Ref. No. Coph/Esstt./2019/ 84

Date : 14/01/2019.

:: OFFICE ORDER ::

Prof. Mrs. L.P. Pathak (Asstt.Prof.) was deputed to Lonawala, on 10th and 11th January, 2019, for official work (Regarding to attend two days state level seminar) , at Sinhgad Institute of Pharmacy, Lonawala.

She is entitled for T.A. as per rule.


Principal

College of Pharmacy,
Ahmednagar.


Copy to :

1) Prof. Mrs. L.P. Pathak

2) Esstt. Section

3) A/c. Sect.

म. र. व. म. र. व.
 शिवाजी मठ आगर
 01/01/2019 11/01/2019 09:23:11
 सि. नं. 2000/18 DBC:3A
 शिवाजी मठ आगर पुणे
 (शिवाजी मठ आगर टप्पे - 2000/18333)
 मूल्य: ₹ 320.00 = ₹ 320.00
 म. र. व. म. र. व.
 शिवाजी मठ आगर
 ₹ 320.00
 RASHANI P
 0425553

शुभ यात्रा HAPPY JOURNEY			AFA 23006479
ATVM TICKET		11/01/2019	
Rs. 15/-	JOURNEY	एकल	6479
UTS NO : ZRGACD9134			
मोनावला से पुणे जं		दू	स
MONAVIA TO PUNE JN.		II ORD	
मोणावळा पुणे जं. वि. श्रे. साधारण		KM 64	
Via		KM 64	
AD: 1 CH: 0 Rs. 15/-			
Journey should commence within 1 hour(s)			
SAC: 996411 IR: 27AAAGM0289C2ZJ		MODE: CARD	
R17255 11/01/2019 15:04 LNLTO1			
IR recovers average 36% of cost on suburban trains			

Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY, AHMEDNAGAR

TRAVELLING ALLOWANCE BILL


Name and Designation Mrs. Leena Pathak Date 16/01/2019
Asst. Professor 2) Basic Pay Rs : _____
 3) Purpose of Journey and order No Seminars

Date	From		Date	To		Mode of Conveyance i.e By Rail / S.T. / Road / by hired / Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
	Place	Time Of Departure		Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
10.1.19	Ahmednagar Savedi	4.45 a.m	10.1.19	Ahmednagar Pune Stand	5.00 a.m	private	5 km	25/-	
10.1.19	Ahmednagar Bus Stand	5.00 a.m	10.1.19	Pune Shivaji Nagar Lonavada	08.00 a.m	By Bus	120 km	320/-	
10.1.19	Shivajinagar	8.11 a.m	10.1.19	Lonavada	10.30 a.m	By Local train	85 km	15/-	
11.1.19	S.I.P.S Lonavada	3.30 p.m	11.1.19	Lonavada Station	4.10 p.m	By Auto	10 km	100/-	
11.1.19	Waranwade Station	4.40 p.m	11.1.19	Pune Shivajinagar	6.30 p.m	By Local Rail	85 km	15/-	
11.1.19	Shivajinagar Pune	6.45 p.m	11.1.19	Ahmednagar	9.00 p.m	By Bus	120 km	220/-	
								<u>695 + 360</u>	<u>1055</u>

Add :- 1) Daily Allowance at ordinary rate at Rs 360/- per day for two days i.e for _____ hours
 Absence from the place of Head Quarter.

2) Difference Between D.A. at or dinaary and special rate at Rs _____ per day for _____ halt at Special Place

Total claim Rs 1055 - 695 = _____

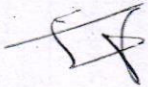
Signature 

CERTIFICATE

Certified that -

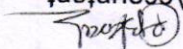
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount in the bill
- 4) I have not taken any advance (of Rs _____ Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to

Signature of the Claimant



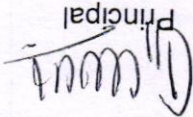
I have Checked the T.A. Bill of Shri Mr. L.P. Rathak
The Amount Claimed by him may please be
Passed For Payment of Rs. 695/-

Accountant

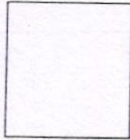


Approved and passed for payment of Rs 695/-

Principal



Received the amount of Rs 695/-



Stamp & Signature of the Claimant

05

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : ⁴⁷⁵480

Dated : 18-Jan-2019

Particulars	Amount
Account : Misc Expenses	750.00

Through :

Cash

On Account of :

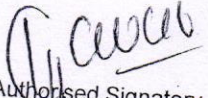
Being amount paid to Mrs Leena Pathak for registration fees paid (Seminor) as per sanctioned.

Amount (in words) :

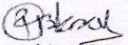
Indian Rupees Seven Hundred Fifty Only

Rs. 750.00

Receiver's Signature:


Authorized Signatory

Checked by


Verified by

RECEIPT

Date : 13/01/2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees

In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 750/-

Sign :



Name :

Leena Patil

Date :- 18/11/2019

To,

The Principal,
D.V.P.F's college of pharmacy,
Ahmednagar.

Applicant :- Prof. Leena Pathak.

Sub :- Requisition to obtain/sanction
expenditure of seminar at
SIPS, Lonavala.

Respected sir,

with reference to above
mentioned subject, I attended seminar
held on SIPS, Lonavala. for two days.

I attached the receipt of this.

Kindly sanction the expenditure
of seminar. (Rs. 750/-)

Thanking you.

A/c
sanctioned Rs. 750/-

Leena
18/11/2019

Yours sincerely



(Prof. Leena Pathak)


SINGHAD INSTITUTE OF PHARMACEUTICAL SCIENCE

309/310 KUSGAON (BK), LONAVALA,, PUNE - 410401.

Email :sipsaccounts@sinhgad.edu

Sinhgad Institutes

FEE RECEIPT

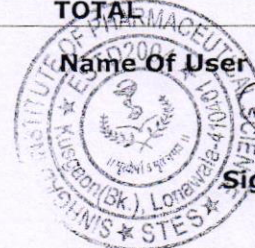
 Receipt No : **LIPS/1819/01153**

 Date : **10-1-2019**

 Received From : **Leena P Pathak**

Description	Amount ₹	Description	Amount ₹
Seminar & Workshop Fees-Others/18-19	500.00		
Hostel Stay Charges -Others/18-19	250.00		

TOTAL : ₹ 750.00
Mode Of Payment : CASH A/C
Amount in Words :
 INR Seven Hundred Fifty Only.

Remark
Name Of User : POONAM
Signature


DD/Cheque subject to be realisation.

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 564

Dated : 27-Feb-2019

Particulars	Amount
Account : Travelling Exps-Staff	755.00
	Rs. 755.00

Through :

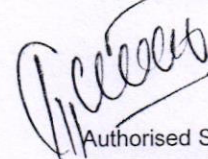
Cash

On Account of :

Being amount paid to Shri Karale R B for travelling at Pune for office work as per sanctioned.

Amount (in words) :


Indian Rupees Seven Hundred Fifty Five Only



Authorised Signatory

Receiver's Signature:

Checked by


Verified by

RECEIPT

Date : 27/07/2019

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees ... Six ... Hundred ... Thirty ... only

In cash/By Cheque/D.D.No.....Dated / / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 630/-

Sign : R. B. Krale

Name : R. B. Krale

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

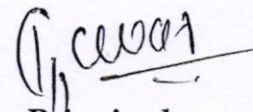
Ref. No. Coph/Esstt./2019/281

Date : 27/02/2019.

:: OFFICE ORDER ::

Shri. R.B. Karale (Asstt. Accountant) was deputed to Pune, on 24th February, 2019, for official work (Regarding to attend student development meeting), at Baxing Sabhagruh, Shiv Chatrapati Kridapith, Balewadi, Pune.

He is entitled for T.A. & D.A. as per rule.



Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Shri. R.B. Karale

2) Esstt. Section

3) A/c. Sect.



डॉ. प्रभाकर देसाई
एम्.ए., पीएच्.डी.
संचालक

सावित्रीबाई फुले पुणे विद्यापीठ

(पूर्वीचे पुणे विद्यापीठ)

राष्ट्रीय सेवा योजना

गणेशखिंड, पुणे - ४११ ००७



कार्यालय क्र. : ०२०-२५६९७३४१
०२०-२५६०११५३
फॅक्स क्र. : ०२०-२५६९७३४१
मोबाईल : ९८८१९०८०२०

रासेयो/२०१८-१८/४६५

प्रति,

दि. २२/०२/२०१९

मा. प्राचार्य व

रासेयो कार्यक्रम अधिकारी

रासेयो संलग्नित व स्वायत्त महाविद्यालये व परिसंस्था,

पुणे, अहमदनगर व नाशिक जिल्हा

विषय : राष्ट्रीय सेवा योजना व विद्यार्थी विकास मंडळ अंतर्गत लेखा परीक्षण पूर्वनियोजन कार्यशाळा महोदय/महोदया,

सावित्रीबाई फुले पुणे विद्यापीठ, राष्ट्रीय सेवा योजना / विद्यार्थी विकास मंडळ अंतर्गत नियमित कार्यक्रम, विशेष शिबिर, विविध योजना व शैक्षणिक उपक्रम आपल्या महाविद्यालयात/मान्यताप्राप्त संस्थेत शैक्षणिक वर्ष २०१८-१९ मध्ये राबविण्यात आलेल्या आहेत. त्या संदर्भातील सर्व लेखे दरवर्षीप्रमाणे केंद्रिय पद्धतीने स्विकारण्यात येणार असून सदर केंद्रिय लेखा परीक्षणाचे वेळी येणाऱ्या शंकाचे निरसन करण्याकरिता 'केंद्रिय लेखा परीक्षण पूर्वनियोजन' कार्यशाळेचे आयोजन दि. २४ फेब्रुवारी २०१९ रोजी, दु. २.३० ते ०५.०० या वेळेत, बॉक्सींग सभागृह, शिव छत्रपती क्रीडापीठ, बालेवाडी, पुणे येथे पुढीलप्रमाणे करण्यात आले आहे.

विभाग	जिल्हा	नाव नोंदणी वेळ	कार्यशाळा वेळ
राष्ट्रीय सेवा योजना व विद्यार्थी विकास मंडळ एकत्रित कार्यशाळा	पुणे, अहमदनगर व नाशिक	दु. १.०० ते दु. ०२.००	दु. २.३० ते सायं. ५.००

तरी सदर कार्यशाळेकरिता रविवार, दि. २४ फेब्रुवारी २०१९ रोजी दु. २.३० ते ०५.०० या वेळेत, बॉक्सींग सभागृह, शिव छत्रपती क्रीडापीठ, बालेवाडी, पुणे येथे आपल्या महाविद्यालयातील/संस्थेतील रासेयो कार्यक्रम अधिकारी/विद्यार्थी विकास अधिकारी यांना वरीलप्रमाणे समक्ष उपस्थित राहण्याबाबत सूचित करावे. कळावे, ही विनंती.

Alc

for necessary procedure.

23/2/2019.

संचालक
राष्ट्रीय सेवा योजना



सावित्रीबाई फुले पुणे विद्यापीठ
विद्यार्थी विकास मंडळ, राष्ट्रीय सेवा योजना विभाग

आयोजित

केंद्रीय लेखा परिक्षण पूर्व नियोजन कार्यशाळा

२०१८-१९

दि. २४ फेब्रुवारी २०१९

उपस्थितीपत्र

प्रा./डॉ.

महाविद्यालय

यांनी दि. २४ फेब्रुवारी २०१९ रोजी शिव छत्रपती क्रीडापीठ, बालेवाडी, पुणे याठिकाणी, सावित्रीबाई फुले पुणे विद्यापीठ, विद्यार्थी विकास मंडळ, राष्ट्रीय सेवा योजना विभाग यांच्या संयुक्त विद्यमाने आयोजित 'केंद्रीय लेखा परिक्षण पूर्व नियोजन' या एकदिवसीय कार्यशाळेत सहभाग घेतल्याबद्दल सदर उपस्थितीपत्र प्रदान करण्यात येत आहे.

डॉ. प्रभाकर देसाई
संचालक

विद्यार्थी विकास मंडळ/राष्ट्रीय सेवा योजना

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY, AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Date 27 / 02 / 2019.

Name and Designation Karale Rahul Branches
Asst. Accountant

2) Basic Pay Rs : _____
 3) Purpose of Journey and order No उत्प्रेषित निवृत्त परिसरगत कार्यवाही

From			To			Mode of Conveyance i.e By Rail / S.T. / Road / by hired/ Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
24/02/19	W.E. Vitthal nagar	08.30 AM	24/02/19	Pune (at Nagard)	9.10 AM	private	123	30	30
24/02/19	Pune (at Nagard)	09.30 AM	-	Pune	12.15 PM	private	15	100	100
24/02/19	Pune	12.18 PM	-	Balegaon	1.10 PM	private	15	100	100
24/02/19	Balegaon	5.30 PM	-	Pune, Shivajinagar	6.00 PM	private	123	170	170
24/02/19	Shivajinagar	6.15 PM	-	Ahmednagar	10.00 PM	private	15	60	60
24/02/19	Nagare	10.10 PM	-	Vitthal nagar	10.48 PM	private	15	60	60
Total									630

Add :- 1) Daily Allowance at ordinary rate at Rs 125 per day for 1 days i.e for _____ hours
 Absence from the place of Head Quarter. 125 per day for _____ halt at _____
 2) Difference Between D.A. at or dinaary and special rate at Rs _____ per day for _____
 Special Place 7557

Total claim Rs 630 - + 125 = 7557

Rahul
 Signature

CERTIFICATE

52

Certified that –

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to

Prabir

Signature of the Claimant

I have Checked the T.A. Bill of Shri Karale R.B.

The Amount Claimed by him may please be
Passed For Payment of Rs. 630/- + 125/- = 755/-

Prabir
Accountant

Approved and passed for payment of Rs 630/- + 125/- = 755/-

Prabir
Principal

Received the amount of Rs 630/- + 125/- = 755/-

Prabir

Stamp & Signature of the
Claimant

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Journal Voucher

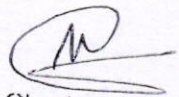
No. : 245

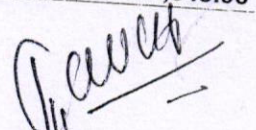
Dated : 22-Nov-2019

Particulars	Dr	Debit	Credit
ICMR Project Travel Grant To Sawant R.L. (Work Adv)		2,848.00	
			2,848.00
		Rs. 2,848.00	Rs. 2,848.00

On Account of :

Being ICMR Grant work advance utilised for 3rd world congress on drug discovery
on dtd 20 to 21.11.2019 Location- Mumbai by Proff. Dr. Sawant sir. Amount utilised
as per sanction on dtd 22.11.2019


Checked by


Authorised Signatory

Verified by

दि: 22/11/2019

No. 29

Date

प्रति,
मा. प्राचार्य
औषधानिमिशिक्षा महाविद्यालय
अहमदनगर

विषय - विनास मंजूरी मिळणेबाबत....

महोदय,

वरील विषयास अनुसरून विनंती अर्ज करतो की आपल्या महाविद्यालयातील ~~एम.ए. प्रकल्पाअंतर्गत~~ पुंढई येथे झालेल्या उच्च world congress on drug discovery साठी दि: 20/11/2019 व 21/11/2019 कोणी उपस्थित राहिलो होतो. त्यासाठी 28481 रु खर्च झाला तरी सदर खर्चास मंजूरी मिळाली ही नमू विनंती.

AIC

Sanctioned Rs 28481/-

आपला विश्वासु

22/11/2019

Pr

Pr. R.L. Sawant

TAX INVOICE
AISHWARYA GARDEN RESTAURANT
 MALWADI, TALEGAON DHABADI, PUNE-410507
 VISIT WEBSITE - WWW.AISHWARYAGARDEN.IN
 Phone No. 4517766, 4517777
 Table No. 4 Steward: 20 Covers: 2
 Bill No. 106 Date: 21/11/2019 8:54

Item	Qty	Rate	Amount
Shirni	1	67.0	67.0
Misal Pav	2	85.0	170.0
Mineral Water	1	23.0	23.0
Pav	2	5.0	10.0
Tea	1	30.0	30.0
Sub Total (RS)			300.0
SGST 2.5% (RS)			7.5
CGST 2.5% (RS)			7.5
Total (RS)			315.0

Gr. Total (RS) : 315

GST No. 27AOC190672019

Visit Website - www.aishwaryagarden.in
www.aishwaryahotel.com

Thank You Patronizing Aishwarya Garden Restaurant Visit Again..

VISAWA
 Pure Veg
 Pajin Complex, Unit No.1, 10
 Plot No.6, Sec.19C
 Vashi, Navi Mumbai
 Ph: 27636163
 Mob: 9699219117, 9699219118

TAX INVOICE

Date : 21/11/19 Bill No. : 163244
 T.No. : 7-B W. No. : 7

Particulars	Qty	Rate	Amount
IDLI SAMBAR	1	45	45
MEDU WADA SAMBAR	1	50	50

Sub Total : 95.00
 SGST @2.5% : 2.38
 CGST @2.5% : 2.38

Food Total : 99.76

2/2 Total : 100

GSTID 27AOC190672019 (10:03 AM)
 E.&O.E. Thank You Visit Again

TAX INVOICE
AISHWARYA GARDEN RESTAURANT
 MALWADI, TALEGAON DHABADI, PUNE-410507
 VISIT WEBSITE - WWW.AISHWARYAGARDEN.IN
 Phone - 02114567766 M- 9689431995
 Table No: 4 Steward: 20 Covers: 2
 Bill No : 106 Date: 21/11/2019 8:54

Item	Qty	Rate	Amount
Lasooni Batai	1	190.0	190.0
Wheat R. 15	5	28.0	140.0
Mineral Water	1	23.0	23.0
Dal Tadka	1	155.0	155.0
Half Jeera Rice	1	100.0	100.0

Sub Total (RS) : 608.0
 SGST 2.50% (RS) : 15.2
 CGST 2.50% (RS) : 15.2
 Total (RS) : 638.4

Gr. Total (RS) : 638

GST No - 27AOC190672019

Visit Website - www.aishwaryagarden.in
www.aishwaryahotel.com

Thank You Patronizing Aishwarya Garden Restaurant Visit Again..

Original attached
 IOR Travel file.

Platinum Inn

Plot No 11, Sector A.P.M.C Road,
sec19c apmc vashi vashi navi mumbai 400705
Mob:-8070183333 / 8070193333

platinuminn2018@gmail.com
Web: www.platinuminn.com

Bill No: 3309 Bill To: OYO G.Name: RAMESH SWANAT Address: BEHIND SAGAR HOTEL, PLOT NO 8 TO 15/2, NEAR SAMARTH NAGAR, SAWEDI AHMDNAGAR ZXUM0561 9850156735 Company: OYO, OYO OYO	Tax Invoice	Grc No: 3127 Bill Date: 21-Nov-2019 Room No : 108 Room Type : Ac Room Check In Date : 20-Nov-2019 14:42 Check Out Date : 21-Nov-2019 12:05 Pay Type: Cash Pax 1
---	--------------------	--

Date	Room No	Description	Ref No	Amount
20-11-19	108-Ac Room	RENT A/C		1540.18
		SGST@6.00%		92.41
		CGST@6.00%		92.41
				1725.00

Gross Amount: One Thousand Seven Hundred Twenty Five Only

Net Amount : **1725.00**

Receipt No	Receipt Date	Amount	Type
3095	21-Nov-2019	1725.00	Cash

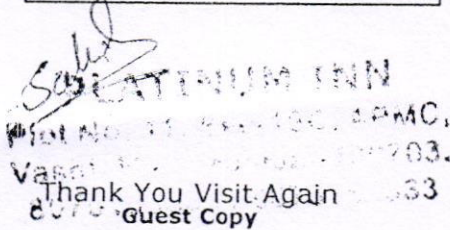
Summary	
CGST@6.00%	92.41
RENT A/C	1540.18
SGST@6.00%	92.41

Gross Amount: 1725.00

Receive: **1725.00**

No Pax: 1

Receptionist
For Platinum Inn
27AAIHD1851Q1ZV


 Plot No 11, Sector A.P.M.C Road,
 Vashi, Navi Mumbai - 400705.
 Thank You Visit Again
 Guest Copy

Guest Signature
RAMESH SWANAT

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

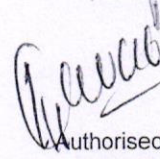
Bank Payment Voucher

No. : 143

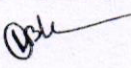
Dated : 28-Jun-2019

Particulars	Amount
Account :	
ICMR Project Travel Grant	6,653.00
Bank Charges	1.18
Through :	
SBI A/C NO 10273822209	
On Account of :	
Being bank charges and ICMR Conference charges Mumbai (3rd World Congress on Drug Discovery and Development 2019- as per sanctioned.	
Amount (in words) :	
Indian Rupees Six Thousand Six Hundred Fifty Four and Eighteen paise Only	
	Rs. 6,654.18

Receiver's Signature:


Authorised Signatory

Checked by


Verified by



डॉ. विठ्ठलराव विखे पाटील फाउंडेशनचे
औषधनिर्माणशास्त्र महाविद्यालय,

विळद घाट, पो. एम.आय.डी.सी., अहमदनगर
फोन नं.(०२४१) २७७८०४४/ २७७७२१७.फॅक्स नं.(०२४१) २७७८०४४
इमेल आय.डी. : pdcophanrr@rediffmail.com
Accredited by NAAC with Grade "B" (CGPA 2.72)



जा.क्रं. औनिशाम/लेखा/२०१९/

दि. २८/०६/२०१९

प्रति,
प्राचार्य
डॉ.व्ही.व्ही.पाटील फाउंडेशन
कॉलेज ऑफ फार्मसी
विळद घाट अहमदनगर

विषय — आय. सी एम. आर. ऑनलाईन पेमेंटबाबत.

महोदय,

उपरोक्त विषयान्वये विनंती की, फार्मसी कॉलेजमधील आय.सी.एम.आर. चे कॉन्फरन्ससाठी **3RD WORLD CONGRESS ON DRUG DISCOVERY AND DEVELOPMENT- 2019 20TH & 21ST NOVEMBER, 2019, MUMBAI, INDIA** ऑनलाईन पेमेंट फार्मसी कॉलेजच्या स्टेट बँकेच्या अकाउंट नंबर १०२७३८२२२०९ ऑनलाईन खात्यामधून काही तांत्रिक अडचणीमूळे होण्यास अडचण येत आहे. यासाठी रूपये ६६५३/- रक्कम तृषीकेश उर्कीडे (एस.आर.एफ.) यांच्या खात्यात हस्तांतरी करून त्यांच्या डेबीट कार्ड वरून पेमेंट करण्यास परवानगी मिळावी. ही विनंती.

A/c

आपला विश्वासू

for necessary procedure as discussed.

आर. बी कराळे

Awat
28/6/2019



08 JUN

Welcome : PRATAP YASHWANTRAO PAWA



previous site visit: 26-Jun-2019 16:37 IST

lert

28-Jun-2019 [11:10 AM IST]

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DID WE GET EVERYTHING RIGHT?

1 x General Category(National)	₹ 7500
Total Discount Amount	₹ 1000 off
Processing fee	₹ 152.63
Total payable	₹ 6652.63

REGISTER NOW

SUBMIT ABSTRACT

PROCEED TO PAY

AIC

for necessary Procedure.
Sanctioned RS. 6653/- Under
ICMR Grant

Accepted
28/6/2019.

CONTACT IIS

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- Registration
- Technical Programme
- Past Conference
- FAQ's
- Contact

Conference Secretariat

INDIA

ARIYOPA HEALTHCARE

Door No-03, S.S. Group, UK Dutta Road, Dum Dum, Kolkata - 700028,
WestBengal, India

Ph: +91 9674546603 / +91 8431061984

E: contact@drugdiscoveryconference.org

UNITED STATES

ARIYOPA HEALTHCARE

16192 Coastal Hwy. Lewes, DE 19958, US

Ph: +1 (315) 830-2544

E: contact@drugdiscoveryconference.org

WRITE TO IIS

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Address

Subject

Message

3RD WORLD CONGRESS ON DRUG DISCOVERY AND DEVELOPMENT- 2019

20TH & 21ST NOVEMBER, 2019, MUMBAI, INDIA

THEME:"ADVANCES IN DRUG DISCOVERY AND DEVELOPMENT"

DAYS HOURS MINUTES SECONDS

144

14

02

23

REGISTER NOW

SUBMIT ABSTRACT

ONLINE REGISTRATION

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Your Registration for 3rd World Congress on Drug Discovery and Development!



Organizer:

Partha Jyoti Das

Hi DR RAMESH L SAWANT,

Thank you for purchasing 1 ticket(s) for **3rd World Congress on Drug Discovery and Development**.


Your Registration details are as follows:


Booking Id : 2543329


NAME	TYPE	PRICE
DR RAMESH L SAWANT	General Category(National)	INR 6500.0




Event Details :

 Organizer : Partha Jyoti Das

 Venue : Mumbai, Mumbai, India,

 Event Date : 20 Nov 2019 : 9:00 AM - 21 Nov 2019 : 6:00 PM

 Event Link : <https://www.townscript.com/e/copy-of-iii-world-cancer-congress-2019-433320>

PRATAP YASHWANTRAO PAWAR

By SBI branch, State Bank of India may restrict the same with only View/Tax payment facility

You are here: / Reports / Query By Account

1--PayOrder Details

2--PayOrder Details

1--PayOrder Number CNAARXNVQ4

2--Debit Status Success

28-Jun-2019

RISHIKESH GYANDEV UKIRDE

Six Thousand Six Hundred and Fifty Four and Eighteen Paise only

6,654.18

0000010273822209

MIDC AHMEDNAGAR

PRATAP
YASHWANTRAO
PAWAR
CNAARXNVQ4*

PRATAP
YASHWANTRAO
PAWAR
Authorizer 1

3--Credit to beneficiary	6,653.00
4--Commission Amount	1.18
5--Counterfoil Description	Transfer for Reg of Confer Mumbai
6--Transaction Type	NEFT Funds transfer
7--MTIN Number	--

8--Account Details

Account No.	Branch	Amount
0000010273822209	MIDC AHMEDNAGAR	6,654.18

9--Credit Account Details

Beneficiary Name/Account No.	Bank/Branch/IFSC Code	Amount	Credit Status	UTR No.
RISHIKESH GYANDEV UKIRDE/388302011997896	UNION BANK OF INDIA/SANGAMNER/UBIN0538833	6,653.00	Credited to Beneficiary Account	SBIN419179791109

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Dr. Vithalrao Vikhe Patil
Foundation
Ahmednagar

DR. VITHALRAO VIKHE PATIL FOUNDATIONS
COLLEGE OF PHARMACY,
VILAD GHAT, PO. MIDC, AHMEDNAGAR (MS)
Phone No. (0241) 2778044 / 2777217. Fax No. (0241) 2778044
E-mail ID : pdcophanrr@rediffmail.com
Accredited by NAAC with Grade "B" (CGPA 2.72)
Permanently Affiliated to University of Pune, Pune.
Approved by AICTE, PCI, New Delhi & Recognized by UGC, New Delhi



Ref: Coph/2019/ 621

Date-26/06/2019

To,
The Director (Technical),
Dr. Vithalrao Vikhe Patil Foundation

Vilad Ghat, Ahmednagar 414111.

Subject: Permission to present paper at 3rd World Congress on Drug Discovery and Development at Mumbai.

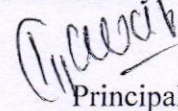
Respected sir,

With reference to the subject cited above, I would like to inform you that Dr. R. L. Sawant, Principal investigator ICMR project is going to present the paper in 3rd World Congress on Drug Discovery and Development – 2019 "Advances in Drug Discovery and Development" to be held on 20th and 21th November 2019 at Mumbai. The registration charges of the said conference are Rs. 6652/-. The registration charges will be incurred from the ICMR grant as per the provision made in the budget. Kindly permit for the same

Thanking you

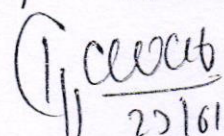
Enclosed: Copy of paper acceptance.

Yours Faithfully,


Principal

College of Pharmacy,
Vilad ghat, Ahmednagar

Sanctioned
A/C
27/6/19

A/C
Sanctioned Rs. 6652/-
as per approval from Director (Tech.)

25/6/2019.

Dr.Vithalrao Vikhe Patil Foundation's



COLLEGE OF PHARMACY

Vilad-Ghat, P.O.- M.I.D.C., AHMEDNAGAR (MS)

Phone No. (0241) 2778044 / 2777180/ 277217,

Fax No.: (0241) 2778044

E-mail ID : pdcophanrr@rediffmail.com

Accredited by NAAC with Grade "B" (CGPA 2.72)

Permanently Affiliated to Savitribai Phule Pune University, Pune.

Approved by AICTE, PCI, New Delhi & Recognized by UGC, New Delhi.

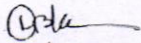


Date: 25/06/2019

Budget Provision Note:- (2019-20)

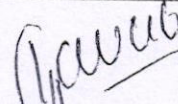
Proposal / Purpose: - Travelling for conference at Mumbai

Account Head	ICMR Travelling Grant Rs.(in Lacs)
Budgeted Amount for the Year 2019-20	00.25
Less :- Expenses incurred till date	00.04
Previous requirement - For conference at Bangalore.	00.09
Present requirement - For conference at Mumbai.	00.07
Balance Available	00.05



Asst. Accountant
Account Section

(Please forward this note to Head Office for Approval)

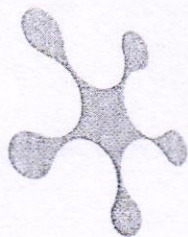

Principal

Recommended / Not Recommended

Approved / Not Approved

Director (Tech.)

Secretary General



3RD WORLD CONGRESS ON DRUG DISCOVERY AND DEVELOPMENT - 2019

20 - 21 November, 2019, Mumbai, India

LETTER OF ACCEPTANCE

To,

Dr. Sawant Ramesh Lakshman
Department of Pharmaceutical Chemistry,
Dr. Vithalrao Vikhe Patil Foundation's College of Pharmacy,
Vilad - Ghat, Ahemadnagar-414111, M.S.

Dear Dr. Sawant Ramesh Lakshman,

Greetings from 3rd World Congress on Drug Discovery and Development - 2019

We are pleased to inform you that your abstract has been accepted for presenting at the conference. The details of presentation are as below,

Mode of Presentation: Oral Presenter

Title of Presentation: "Design of Polo Like Kinase 1 (PLK 1) Inhibitors against Cancer"

Category of Registration: General Category

For Further details on the conference, please visit <http://drugdiscoveryconference.org/>

Please do not hesitate to contact us for any further information. We look forward to receive your registration soon. We look forward to hearing from you. Thank you.

With Best Regards

Partha Jyoti Das
Convenor,

Aruna Das
Convenor,

3rd World Congress on Drug Discovery and Development - 2019 | Mumbai | India

Organised By



Arjyopa Healthcare, #6, S.S. Group, U.K. Dutta Road, Kolkata - 700028, WB, India

W: <https://www.arjyopahealthcare.org> E: Contact@arjyopahealthcare.org Ph: +91 9019542005

RE: Acknowledgement of my abstract and biodata submitted on 28th June 2019

From: Raytheon Healthcare (contact@raytheonhealthcare.com)

To: sawantrl@yahoo.com

Date: Tuesday, 2 July 2019, 11:52 pm PDT

Dear Dr. Ramesh L. Sawant,

Greetings from 3rd World Congress on Drug Discovery and development - 2019...!!

Thanks for your email and we appreciate your keen interest in the summit.

We have received your **Abstract** and it has been got selected to present in the summit as an **Oral Presenter**. The Official Abstract Acceptance Letter is attached herewith for your kind reference.

Your Name has been nominated for the Renato Dulbecco Award, The Awardee will be selected on the basis of the research work, research methodology, Presentation at the conference and the awardee name will be announced at the end of the conference.

We look forward to hearing from you and I hope you'll strongly consider joining us in making the conference successful.

With Warm Regards

Dr. Ramakant Krishnaji Deshpande
Dr. J. Das Aruna Das

Director, Asian Cancer Institute
Director, Raytheon Healthcare

Director, Arjyopa Healthcare

Prof. Shubhada V. Chiplunkar

Director, ACTREC

World Congress on Drug Discovery and Development – 2019 | Mumbai

<http://drugdiscoveryconference.org/>

From: ramesh sawant [mailto:sawantrl@yahoo.com]

Date: Tuesday, July 2, 2019 10:07 AM

contact@drugdiscoveryconference.org

Subject: Acknowledgement of my abstract and biodata submitted on 28th June 2019

We have submitted abstract as well as biodata and recent published paper for the RENATO DULBECCO MEMORIAL AWARD on 28th June 2019 but not received any communication from your end.

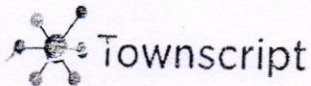
Kindly confirm the safe receipt of the same.

pt for 3rd World Congress on Drug Discovery and Development

wnscript (tickets@townscript.com)

awar.tri@yahoo.com

Thursday, 27 June 2019, 11:46 pm PDT



f Share t Tweet

Your Receipt for 3rd World Congress on Drug Discovery and Development!

Hi DR RAMESH L SAWANT,

You just purchased 1 ticket(s) for event - 3rd World Congress on Drug Discovery and Development.

Your receipt details are as follows:

Order Id : 106261561704308804

NAME	TYPE	PRICE	DISCOUNT
DR RAMESH L SAWANT	General Category(National)	INR 6500.0	via FLAT

Grand Total : INR 6500.0 + INR 152.63 (processing fees) = INR 6652.63

Event Details :

👤 Organizer : Partha Jyoti Das

📍 Venue : Mumbai, Mumbai, India,

🔗 Event Link : [copy-of-iii-world-cancer-congress-2019-433320](#)

Need any help?

Write us at contact@raytheonhealthcare.com . We will get back to you shortly!

Create event of your own

You can also use townscript to sell tickets & manage registrations online!

Create Event

RECEIPT

Receipt #: 2066817
Created: Jun 28, 2019

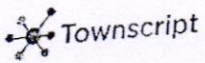
Organizer
Partha Jyoti Das
contact@raytheonhealthcare.com
GSTIN: NA

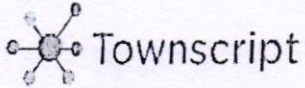
Bill To
DR RAMESH L SAWANT
sawantrl@yahoo.com

Item & Description	Qty	Rate	Amount
General Category(National)	1	6500.0	6500.0

Sub Total : 6500.0
Processing charges : 152.63

Total : **INR**
6652.63





Your Receipt for 3rd World Congress on Drug Discovery and Development!

Hi DR RAMESH L SAWANT,

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Order Id : 106261561704308804

NAME	TYPE	PRICE	DISCOUNT
DR RAMESH L SAWANT	General Category(National)	INR 6500.0	via FLAT

Grand Total : INR 6500.0 + INR 152.63 (processing fees) = INR 6652.63

Event Details :

👤 Organizer : Partha Jyoti Das

📍 Venue : Mumbai, Mumbai, India,

🔗 Event Link : [copy-of-iii-world-cancer-congress-2019-433320](#)

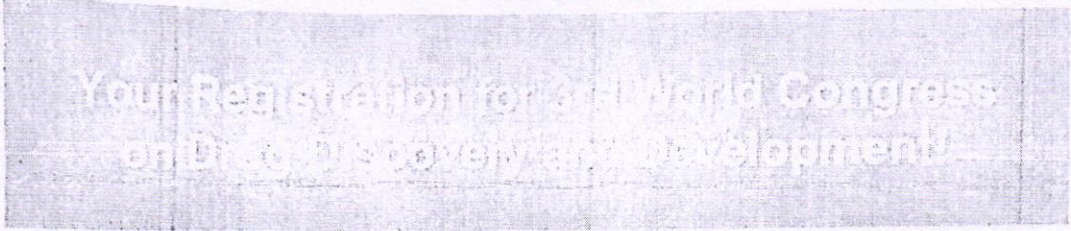
Need any help?

Write us at contact@raytheonhealthcare.com . We will get back to you shortly!

Create event of your own

You can also use townscript to sell tickets & manage registrations online!

Create Event



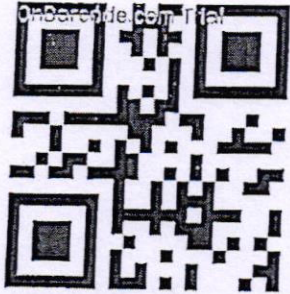
Organizer:
Partha Jyoti Das

Hi DR RAMESH L SAWANT,

Thank you for purchasing 1 ticket(s) for 3rd World Congress on Drug Discovery and Development.

Your Registration details are as follows:
Booking Id : 2543329

NAME	TYPE	PRICE
DR RAMESH L SAWANT	General Category(National)	INR 6500.0



Event Details :

Organizer : Partha Jyoti Das

Venue : Mumbai, Mumbai, India.

Event Date : 20 Nov 2019 : 9:00 AM - 21 Nov 2019 : 6:00 PM

Event Link : <https://www.townscript.com/e/copy-of-iii-world-cancer-congress-2019-433320>

Complete your booking for 3rd World Congress on Drug Discovery and Development

From: Townscript (tickets@townscript.com)

To: sawantrl@yahoo.com

Date: Thursday, 27 June 2019, 11:22 am PDT



Townscript

f Share t Tweet

Your booking for 3rd World Congress on Drug Discovery and Development!

Hi Dr. Ramesh L. Sawant,

We saw that you attempted a booking for event - 3rd World Congress on Drug Discovery and Development.

You can still complete your booking by clicking on the below link.

<https://www.townscript.com/e/copy-of-iii-world-cancer-congress-2019-433320/booking?udf1=2062174>

NOTE* : Ignore this mail if you have already booked the ticket.

Need any help?

Write us at service@townscript.com. We will get back to you shortly!

Create event of your own

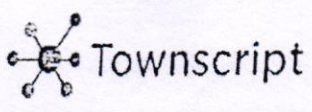
You can also use townscript to sell tickets & manage registrations online!

Create Event

Mobile App

You can explore and buy tickets for the events of your interest on the go. Download it now!





Share Tweet

Your Receipt for 3rd World Congress on Drug Discovery and Development!

Hi DR RAMESH L SAWANT,

You just purchased 1 ticket(s) for event - 3rd World Congress on Drug Discovery and Development.

Your receipt details are as follows:

Order Id : 106261561704308804

NAME	TYPE	PRICE	DISCOUNT
DR RAMESH L SAWANT	General Category(National)	INR 6500.0	via FLAT

Grand Total : INR 6500.0 + INR 152.63 (processing fees) = INR 6652.63

Event Details :

- 👤 Organizer : Partha Jyoti Das
- 📍 Venue : Mumbai, Mumbai, India,
- 🔗 Event Link : [copy-of-iii-world-cancer-congress-2019-433320](https://www.townscript.com/copy-of-iii-world-cancer-congress-2019-433320)

Need any help?
Write us at contact@raytheonhealthcare.com . We will get back to you shortly!

Create event of your own
You can also use townscript to sell tickets & manage registrations online!



53

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 579

Dated : 16-Jan-2020

Particulars	Amount
Registration Fees	300.00
Travelling Exps-Staff	720.00

Through :

Cash

On Account of :

Being amount paid to Nimbalkar V V for travelling at Akurdi Pune for 2 days state level seminar as per sanction.

Amount (in words) :

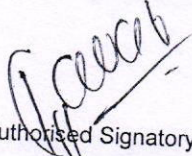
Indian Rupees One Thousand Twenty Only

Rs. 1,020.00


Receiver's Signature:



Checked by



Authorized Signatory



Verified by

RECEIPT

Date: 16/01/2020

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy ,Vilad Ghat ,Ahmednagar.

The sum of Rupees One thousand Twenty only

In cash/By ~~Cheque~~/D.D.No..... Cash.....Dated 16/01/2020

Drawn on

Bill no.....Dated / /2020

On Account of

Rs. 1020/-

Sign: 

Name: Vithalrao V. Nimbal Patil

COLLEGE OF PHARMACY, AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Dr. Vihalrao Vikhe Patil Foundation's

Name and Designation

Prof. V.V. Nimbalkar

2) Basic Pay Rs.:

Date 14/11/2020

Asstt. prof.

3) Purpose of Journey and order No

Conference & Seminar

From			To			Mode of Conveyance i.e. By Rail/S.T./Road / by hired/ Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1	2	3	4	5	6	7	8	9	10
10/01/20	College	07.00 am	10/01/20	Ahmednagar	07.30 am	Auto	15	50	50
10/01/20	Ahmednagar	07.50 am	10/01/20	Pune	10.30 am	private	120	210	210
10/01/20	Pune	10.30 am	10/01/20	Ahmednagar	11.00 am	Auto	22	100	100
11/01/20	Ahmednagar	05.00 PM	11/01/20	Pune	05.30 PM	private	22	210	210
11/01/20	Pune	05.00 PM	11/01/20	Ahmednagar	09.30 PM	Auto	120	50	50
11/01/20	Ahmednagar	09.30 PM	11/01/20	College	10.30 PM	Auto	15		

720/-

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at
Special Place

Total claim Rs 720/-


Signature

CERTIFICATE

Certified that –

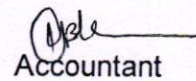
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs — Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for

which I was sent to
* two side private vehicle then
tickets not received.



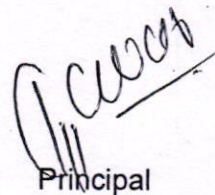
Signature of the Claimant

I have Checked the T.A. Bill of Shri prof. v.r. Dimbalkar
The Amount Claimed by him may please be
Passed For Payment of Rs. 720/-



Accountant

Approved and passed for payment of Rs 720/-



Principal

Received the amount of Rs 720/-



Stamp & Signature of the
Claimant

10/01/2020

TO,

Principal
Dr. V. P. S. College of Pharmacy,
Mildad Ghat, Ahmednagar.

Applicant:- Prof. Vilekarn V. Nimbalkar
Dept. of Pharmacology.

Subject:- Regarding sanction of expenditure.

Respected Sir,

I, the above mentioned applicant was
deputed to attend two days state level seminar
on "Pharmacoeconomics: Quality of Life" held at
Dr. D. Y. Patil Patil college of pharmacy, Akurdi, Pune
on 10th & 11th Jan 2020.

The expenditure incurred against the same:-

1) Registration fees: Rs 300/-

2) TA/for the same: Rs 720/-

Total = 1020/- (Rs one thousand twenty
only)

It is in kind request to sanction the above said
amount.

Thanking you

Yours sincerely
V. Nimbalkar

A/C
Sanctioned Rs. 1020/-

16/01/2020

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

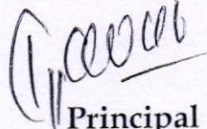
Ref. No. Coph/Esstt./2020/ 63

Date : 16/01/2020.

:: OFFICE ORDER ::

Prof. V.V. Nimbalkar, Aast.Prof. was deputed to College of Pharmacy, Akurdi, Pune for attending two days State level seminar on 10/01/2020 to 11/01/2020.

He is entitled for registration fee occurred & T.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to :

1) Prof. Nimbalkar V.V.

2) Esstt. Section

✓ 3) A/c. Section.

DR. D. Y. Patil Pratishthan's
PADMASHREE DR. D. Y. PATIL COLLEGE OF PHARMACY (B. PHARM)
Akurdi, Pune - 411 044

MISCELLANEOUS RECEIPT

Receipt No.: 5920

Date: 10/01/2020

Received with thanks from: Mr. Vikeram Nimbalkar

class: Dr. W.P.F.'s College of pharmacy
Ahmadnagar.

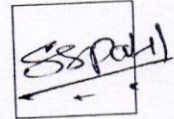
Roll No:

Particulars	Amount
Registration fees for two days.	300/-
State level seminar	

By Cash / D. D. / Cheque. No. _____ dt. _____

On Bank _____

In Words Rs. Three Hundred only.



Receivers Signature



Dr. D. Y. Patil Pratishthan's

Dr. D. Y. Patil College of Pharmacy, Akurdi, Pune

Organised

SAVITRIBAI PHULE PUNE UNIVERSITY

Sponsored Two Days State Level Seminar on

Pharmacoeconomics : Quality of Life



CERTIFICATE

This is to certify that Dr./Mr./Mrs./Ms. Vikram V. Nimbalkar.

has participated as Resource person/ Delegate/ Volunteer/ Member organizing committee in Savitribai Phule Pune University sponsored Two Days State Level Seminar on "Pharmacoeconomics : Quality of Life" conducted on 10th and 11th January 2020. His/Her active participation is deeply appreciated.

MS. J. R. CHOPADE

CO-ORDINATOR

DR. N. S. VYAWAHARE

CONVENER

Dr.VVPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 4712

Dated : 28-Nov-2019

Particulars	Amount
Account : Travelling Exps-Staff	100.00
Misc Expenses	200.00

Through :

Cash

On Account of :

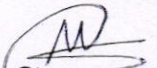
Being cash paid to Prof Hapse BA with Prof. Bhagar BV was deputed to N.N. Sattha College of Pharmacy, Ahmednagar for sending the international conference on 25.11.2019. Travelling allowance sheet attached. Amount paid as per sanction on dtd 28.11.2019

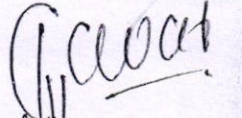
Amount (in words) :

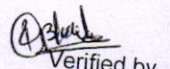
Indian Rupees Three Hundred Only

Rs. 300.00

Receiver's Signature:


Checked by


Authorised Signatory


Verified by

RECEIPT

Date: 28 / 11 / 2019

Received with thanks from Principal, Dr.Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees ... Three Hundred Rs. only

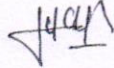
In cash/By ~~Cheque~~/D.D.No. Cash Dated 28 / 11 / 2019

Drawn on

Bill no.....Dated / / 2019

On Account of

Rs. 300/-

Sign: 

Name: S.A. Hapse



Abasaheb Kakade Group's of Institutions
Rashtriya Shikshan Mandal

MNSATTHA COLLEGE OF PHARMACY

Anand Dham Raod, Ahmednagar



In collaboration
Current Trends in Pharmacy and Pharmaceutical Chemistry;
is official Journal hosted and Managed by e-Current Science.

CERTIFICATION OF PARTICIPATION

This is to certify that

Dr./Mr./Ms. Hapse Sandip A. Institute/ Company name Dr. V. V. P. F's college
of Pharmacy, Vilad has participated/ attended and Presented poster on topic Nanotechnology
Ghat.
Based Approaches for enhancements of Bio - in the One day "International workshop on
availability of sustain release formulation.
Recent trends in Managements studies and Future aspects and Poster presentation on field of
pharmaceutical sciences" on 25th November 2019.

Mr. Vikas B Gawali
Director and H.O.D

Adv. Vidyadhari Kakade
Secretary Rashtriya Shikshan Mandal

Miss. Sharmila D Kuskar
Program Co-ordinator

Dr. Merwan Mehta,
Professor,
East Carolina University, Greenville (USA)

Dr. Vithalrao Vikhe Patil Foundation's

COLLEGE OF PHARMACY, AHMEDNAGAR

TRAVELLING ALLOWANCE BILL

Name and Designation Harpse Sandip A.

2) Basic Pay Rs : 21600/-

Date 28 / 11 / 2019

Asst. Professor

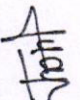
3) Purpose of Journey and order No Attending workshop & poster presentation / 1281

From			To			Mode of Conveyance i.e By Rail / S.T. / Road / by hired / Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
1		3			6				
28/11/19	Home	9:15 AM	28/11/19	N.N. SATHI copb, A. Nagar	9:45	12km	50/-	50/-	
28/11/19	N.N. SATHI copb, K. Nagar	5:15 PM	28/11/19	Home	5:45 PM	12km	50/-	50/-	

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e for _____ hours
Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ halt at Special Place

Total claim Rs 100 + 200 = 300 Rs

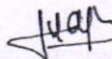

Signature

CERTIFICATE

56

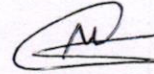
Certified that –

- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs _____ Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to

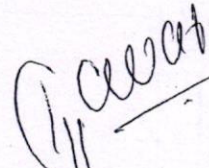

Signature of the Claimant

I have Checked the T.A. Bill of Shri S.A. Hapse

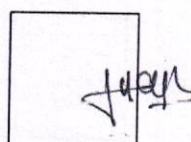
_____ The Amount Claimed by him may please be
Passed For Payment of Rs. 300/-


Accountant

Approved and passed for payment of Rs 300/-


Principal

Received the amount of Rs Three Hundred Ru. only


Stamp & Signature of the
Claimant

Dr.VVPPF's College of Pharmacy
Vilad Ghat
Ahmednagar

Cash Payment Voucher

No. : 470

Dated : 28-Nov-2019

Particulars	Amount
Account : Travelling Exps-Staff	100.00
Misc Expenses	200.00

Through :
Cash

On Account of :


Being cash paid to Prof Bhagat BV with Prof Hapse BA was deputed to N.N. Sattha College of Pharmacy, Ahmednagar for sending the international conference on 25.11.2019. Travelling allowance sheet attached. Amount paid as per sanction on dtd 28.11.2019

Amount (in words) :

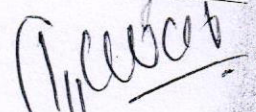
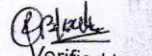
Indian Rupees Three Hundred Only

Rs. 300.00

Receiver's Signature:



Checked by


Authorized Signatory
Verified by

RECEIPT

Date : 28 / 11 / 2019

Received with thanks from Principal, Dr. Vithalrao Vikhe Patil

Foundation's College of Pharmacy, Vilad Ghat, Ahmednagar.

The sum of Rupees Three hundred only

In cash/By Cheque/D.D.No. Cash Dated 28 / 11 / 2019

Drawn on

Bill no. Dated / / 2019

On Account of

Rs. 300/-

Sign :

Name :

B. V. Bhosot



Abasaheb Kakade Group's of Institutions
Rashtriya Shikshan Mandal
N N SATTHA COLLEGE OF PHARMACY
Anand Dham Road, Ahmednagar

Receipt No :

CASH RECEIPT




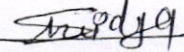
Salutation: Mr./ Ms./ Mrs./ Prof./ Dr.

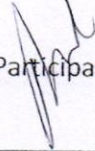
Name: Babashheb Bhagat Designation: Asst. Prof.

Address : B. V. Ajmar / V. V. P. C. O. P. Nagar Institute Name: paid registration fee Rs

200 /- (Two Hundred Only) for the participation of International seminar on Recent trends in Managements studies and Future aspects and Poster presentation on field of pharmaceutical sciences on 25 Nov 2019.


Sign of Receiver


Accountant Sign


Sign of Participant

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY,
Ahmednagar.

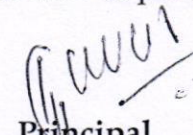
Ref. No. Coph/Esstt./2019/ 1281

Date : 27/11/2019.

:: OFFICE ORDER ::

Prof. Bhagat B.V., Astd.Prof. and Prof. Hapse B.A., Asstd.Prof. were deputed to N.N.Sattha College of Pharmacy, Ahmednagar for attending the international conference on 25th November, 2019.

They are entitled for registration fee occurred & T.A. as per rule.


Principal
College of Pharmacy,
Ahmednagar.

Copy to: HADCE B.A.

- 1) Prof. Dr. R.L. Sawant 2) Prof. B.V. Bhagat 3) Esstt. Section 4) A/c. Section.



Abasaheb Kakade Group's of Institutions
Rashtriya Shikshan Mandal

NN SATIHA COLLEGE OF PHARMACY

Anand Dham Raod, Ahmednagar

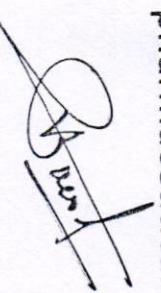


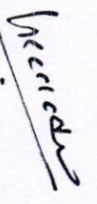
In collaboration
Current Trends in Pharmacy and Pharmaceutical Chemistry;
is official Journal hosted and Managed by e-Current Science.

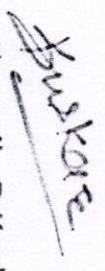
CERTIFICATION OF PARTICIPATION


This is to certify that

Dr./Mr./Mrs. Babasaheb V. Bhagat Institute/ Company name Dr. V. V. P. college of Pharmacy, Vilad Ghat. has participated/ attended and Presented poster on topic Lipid Based Nano Emulsion For Selected NSAIDs in the One day "International workshop on Recent trends in Managements studies and Future aspects and Poster presentation on field of pharmaceutical sciences" on 25th November 2019.


Mr. Vikas B Gawali
Director and H.O.D


Adv. Vidyadhar J Kakade
Secretary Rashtriya Shikshan Mandal


Miss. Sharmila D Kuskar
Program Co-ordinator


Dr. Mervan Mehta,
Professor,
East Carolina University, Greenville (USA)

Dr. Vithalrao Vikhe Patil Foundation's
COLLEGE OF PHARMACY, AHMEDNAGAR
TRAVELLING ALLOWANCE BILL

Name and Designation Prof. Bhagat Baburao V.
Asst. Professor

2) Basic Pay Rs: _____

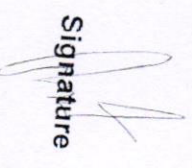
3) Purpose of Journey and order No. Pharmacy, Nagon, Internship workshop on college of
Pharmacy, Nagon, Internship workshop on college of
 Date 28/11/2019

From			To			Mode of Conveyance i.e. By Rail/S.T./Road / by hired/ Owned conveyance	Distance Km.	Rate of fare or Kilometrage or actuals	Amount claimed
Date	Place	Time Of Departure	Date	Place	Time of arrival				
25/11/19	Home	9:15 am	25/11/19	M.N. Sathra Camp, Nagon	9:45	private	12 km	50/-	50/-
25/11/19	M.N. Sathra Camp, Nagon	5:15 pm	27/11/19	27/11/19	5:45 pm	private	14 km	50/-	50/-

Add :- 1) Daily Allowance at ordinary rate at Rs _____ per day for _____ days i.e. for _____ hours
 Absence from the place of Head Quarter.

2) Difference Between D.A. at ordinary and special rate at Rs _____ per day for _____ days i.e. for _____ hours
 Special Place

Total claim Rs 100 + 200 = 300/- Registration fee _____

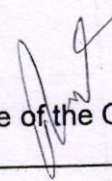
Signature 

57

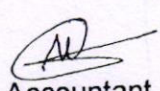
CERTIFICATE

Certified that –

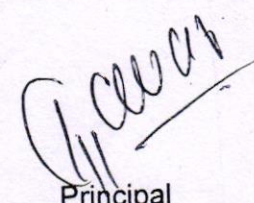
- 1) I have travelled by the shortest route
- 2) By the class / mode of conveyance for which I am entitled
- 3) The actual expenditure incurred by me is not less than Claimed amount In the bill
- 4) I have not taken any advance (of Rs _____ Journey)
- 5) If there is any audit Objection and if there is recovery and ready to refund the same
- 6) I have travelled for the Specific work of the institution and have completed the work for which I was sent to


Signature of the Claimant

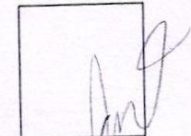
I have Checked the T.A. Bill of Shri Bhagat B.V.
_____ The Amount Claimed by him may please be
Passed For Payment of Rs. 300/-


Accountant

Approved and passed for payment of Rs 300/-


Principal

Received the amount of Rs three hundred only


Stamp & Signature of the
Claimant