



Koneru Lakshmaiah Education Foundation

(Deemed to be University estd. u/s. 3 of the UGC Act, 1956)

❖ Recognised as Category 1 University by UGC ❖ Approved by AICTE ❖ ISO 21001:2018 Certified

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Travelling and Halting allowances of Prof./Dr./Sri _____

Member of the _____

Headquarters are notified to the Controller of Examinations: _____

Bank Details for Credit of Honorarium (NEFT/RTGS):

Bank Name: _____

Branch: _____

Name of the Account Holder: _____

Account Number: _____

IFSC Code: _____

PAN Number: : _____

Mobile Number: _____

E-mail ID: _____

Honorarium Amount (₹) : _____

Rupees (in words) _____

Received payment. I agree to refund the amount that is not approved by the audit authorities.

Station:

Signature:

Date:

Examiner in:

Stamp where
amount exceeds
Rs. 5000/-

(For Office use)

Passed for Rs. _____ Paid by Cash/Cheque No _____

Date:

CONTROLLER OF EXAMINATIONS