

**PUNJAB NURSES REGISTRATION COUNCIL,
SAS NAGAR, MOHALI.**

REMUNERATION BILL

Note : All Columns should be filled in clearly and completely for making payments.

Name: _____ College Address: _____
Designation: _____
Mobile No. _____
E-mail Id: _____ Residential Address: _____
Account No. _____
IFSC _____
Bank Name _____ Centre Name Patiala / Amritsar / PNRC

Nature of Assignment	Class	Subject	No. of Answer Sheets	Amount @ Rs. 10/- per answer sheet
Evaluation of Answer Sheets of Nov. 2016 exams				

Total _____

Countersigned with seal
(Principal)

Signature _____

For Office Use only :

The above bill is verified and passed for payment of Rs. _____

Dealing Asstt. / Accounts

Supdt.

Registrar