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Place : M. Strit Signature: K. M. Sinha Ro Signature.....

Date : 4/9/02 Name of Coordinator Krishna mohan Sinha Name of Liaison Officer (Dr. A.K. Sircar)

All the above items (except .....) .....)are supplied to the Liaison Officer on .....(date) with our bill No..... date 4/5/02 for an amount of Rs. 1284 /-

Place : M Strit Signature R. Selvaj

Date : 4/5/02 Name of the Supplier R. Selvaj

The items supplied by the supplier are issued to the Coordinator and entry to the effect has been made in Stock Register at page number .....dated.....

Date : Signature of ..... Liaison Officer

(CF No.:S1-8085)