Place : N. Street Signature: K.M. Singh Signature.....

Date : 8/9/02 Name of Coordinator Krishna Mohan Singh Name of Liaison Officer Dr. P.K. Singh

All the above items (except .....) .....)are supplied to the Liaison Officer on .....(date) with our bill No..... date 8/9/002 for an amount of Rs. 732/= /-

Place : M Street Signature R. Selvan

Date : 8/9/2002 Name of the Supplier R. Selvan

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)