



BOARD OF INTERMEDIATE & SECONDARY EDUCATION ABBOTTABAD

REMUNERATION CLAIM OF SUPERVISORY STAFF FOR SSC / HSSC (A / S) EXAMINATION, 20

NAME OF CENTRE: _____ Centre No: _____

| S. No | Status | Name | Desig | Posting/School Address | Sign | CNIC | Contact | Number of Working Days | Rate | Amount | Account No. | Bank Name ABL/NBP/_ | Bank Branch Code | For Audit Use Only |
|---------------------|---------|------|-------|------------------------|------|------|---------|------------------------|--------|--------|-----------------------------|---------------------|------------------|--------------------|
| 1 | Supdt: | | | | | | | | 1800/- | | | | | |
| 2 | Dy Sup: | | | | | | | | 1500/- | | | | | |
| 3 | Invig 1 | | | | | | | | 1200/- | | | | | |
| 4 | Invig 2 | | | | | | | | // | | | | | |
| 5 | Invig 3 | | | | | | | | | | | | | |
| 6 | Invig 4 | | | | | | | | | | | | | |
| 7 | Invig 5 | | | | | | | | | | | | | |
| 8 | Invig 6 | | | | | | | | | | | | | |
| 9 | Invig 7 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| TOTAL CLAIM: | | | | | | | | | | | TOTAL PASSED AMOUNT: | | | |

Space for Audit:

Audited for Rs. _____

Asstt:Audit

Supdt:Audit

Audit Officer:BISE,Atd

Name & Designation of Superintendent:

Stamp & Signature _____

Menial Staff

Daftri=Rs.50/- Water Man=Rs.40/-
Chowkidar=Rs.40/- Typist=Rs.200/- Fixed
Seating Arrangement=Rs.200/- Fixed
Sweeper=Rs.300/- Fixed

Bill Assistant: /ACE Conduct:

Per day Remuneration
Superintendent =Rs.1800/-
Deputy Sup: Rs.1500/-
Invigilator=Rs.1200/-