

# BOARD OF INTERMEDIATE & SECONDARY EDUCATION, BAHAWALPUR

Secondary School Certificate/ Intermediate & Fazil Arabic (Oral)  
Annual/Supplementary (Practical Examination, 20\_\_\_\_)

Payment Bill Form

(For Examiners who have no Head - Examiner)

Important Instructions.

1. The Examiners must fill in all the blanks and the columns except columns 8,9 & 11.
2. To be submitted to the Office Superintendent (Secrecy) by Registered post within 7 days of the last date of Practical Examination

Name of Centre: \_\_\_\_\_

Subject: \_\_\_\_\_ Papers/s: \_\_\_\_\_

Identity Number	Name & Address of Practical Examiner	Total Number of Candidates Examined	Date of Conduct of Practical Examination/s	Date of Despatch of Award - Lists.	Date of Despatch of Counterfoils.	Extension in time limit granted by the officer (Quote letter No. & Date)	Delay in Despatch of Award - List	Delay in Despatch of Counterfoils.	Date of Despatch of Payment Bill	Delay in Despatch of Payment Bill
1	2	3	4	5	6	7	8	9	10	11

Certified that the entries made above are correct.

Signature of Practical Examiners \_\_\_\_\_ Identity No. PS/PI \_\_\_\_\_

Dated \_\_\_\_\_ 20\_\_\_\_

## CONTROLLER OF EXAMINATIONS

<p>Does budget provision exist or not? _____</p> <p>Certified that the bill has been checked and found correct.</p> <p>Dealing Clerk Asstt. Finance OSF.</p> <p>Pay Rs. _____ Cheque No. _____</p> <p>Rupees _____ Dated _____</p> <p><b>D.S.F. Secretary</b></p>	<p>Passed for payment of Rs. _____</p> <p>Rupees _____</p> <p>_____</p> <p><b>D.S.F. Secretary</b></p>	<p>Passed for payment of Rs. _____</p> <p>Rupees _____</p> <p>_____</p> <p><b>Asstt. Auditor Audit Officer</b></p>
---	--	--

BOARD OF INTERMEDIATE & SECONDARY EDUCATION, BAHAWALPUR.

(See Instructions Overleaf)

Bill of Assistant to Practical Examiners, Laboratory Assistants and Contingency for the PRACTICAL INTERMEDIATE ANNUAL / SUPPLEMENTARY EXAMINATION 20

Month:

Voucher No.

From No. SE/A 36

Budget Head

Date of Examination

Subject

Name of Laboratory Practical Centre Govt. College

A-Assistant to Practical Examiners (Payment to be made to the Assistant Concerned)

Total No. of Students Examined

Name of Assistants/s to Practical Examiner/s with complete Address/es	Qualifications	No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		No. of Candidates examined & date of exam		Total No. of days put in by every Asstt.	Rate		Amount	
		M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E		Rs.	Ps.	Rs.	Ps.
1																						
2																						
Total No. of Candidates Examined																		Total Amount				

B- Laboratory Assistant and Contingency (Payment to be made to the Head of Institution)

No. of Candidates Examined (Part I & II to be shown separately or Part I & II combined as the case may be)	Laboratory Assistant		Contingency		Total Amount		Advance Taken		Net Amount	
	Rate of Payment		Amount		Rate of Payment		Amount			
			Rs.	PS.	Rs.	PS.	Rs.	PS.	Rs.	PS.
	(1) First Batch									
	Per Candidate									

CERTIFICATE

I. Certified that the persons charged in part A of this bill were actually engaged in assisting the practical examiners during the day/s noted against the name of each and that they worked satisfactorily. it is further certified that the total number of candidates examined, and no other bill in connection with the above examination has been signed.

Practical Examiner Identity No. PI

In the subject of

Certified that the total No. of candidates examined by examiners at above mentioned practical centre and no other, bill in connection with the above examination has been signed by me.

Countersigned Signature of the Concerned Principal (with stamp)

Institution Concerned Instead of Head Examiner

FOR USE IN THE BOARD'S OFFICE

Passed for payment of Rupees

Rs.

ASF/DSF

Passed for payment of Rupees

Rs.

Auditor

Secretary

Audit Officer



## **INSTRUCTIONS**

Only one bill form should be used for Practical Examination in a subject even if candidates who appeared in the examination in that subject are for different parts of intermediate examination viz; Part I and II or combined.

The number of candidates should, however be shown separately for these parts in the relevant columns. A number of bills received in respect of one subject will not be accepted.

### **PAYMENT FOR CHEMICAL USED BREAKAGE.**

1)	Chemistry	Rs.12/-	per candidate
2)	Physics	Rs. 6/-	-do-
3)	Biology	Rs. 12/-	-do-
4)	Nursing	Rs. 5/-	-do-
5)	Psychology	Rs. 5/-	-do-
6)	Geography	Rs. 5/-	-do-
7)	Health & Physical / Library Science	Rs. 3/-	-do-

### **LABORATORY ASSISTANT**

1)	Chemistry/Physics/Biology	Rs. 4/-	per candidate each subject
2)	Fine Art/ Psychology	Rs. 3/-	--do--
3)	O/L of Home Economics	Rs. 3/-	--do--
4)	Health and Physical Education	Rs. 3/-	--do--
5)	Nursing/Geography/Library Sc.	Rs. 3/-	--do--
6)	Assistant to Practical Examiner	Rs.75/-	Per Day