<u>ADVANCE REQUEST FORM</u>						
Name o	f Organization:					
Address	s:- Rathinam Tech	ızone Campus, Po	ollachi Main Roa	d, Coimbato	ore	
Department:						Date :
Sr. No. Description						Amount
Total : I	n words					
Submitted by Name : Signature :						
Departr						10
	Aut	horized By		Approv		red By
<u>Budgeti</u>	ing Heads					
1. Salary		8. Conveyance			21. Admission Expenses	27. Rent
2. Admission – Consultancy / Prof Charges		9. Bonus (PLI)	15. Postal & Courier		22. Research	28. Material Reimbursement
3. Power, EB, Diesel		10. Rewards & Recognition	16. Promotion & Marketing			29. CAPEX ( UP to Rs.10000)
4. Print & Stationary		11. Insurance	17. Library Books & Journals		24. Exam / Practical & Theory	30. Repair & Maintenance
5. Liasioning, Regulatory Fee		12. Refreshment	18. Placement Training		25. Sports	31. House Keeping & Security
6. Events & Functions		13. Lab Consumables	19. IT Infra & Lab Maintenance		· 26. OD Interest	32. Management Salary
7. FDP / GLP & FDP			20. Technology Upgradation			33. Transport Expenditure
Invento	ory / Non Inve	ntory Tick)	(Pls Forward		ded to : Purchase Dept / Work Order ( Project ) (Pls Tick)	
<u>Budget</u>	Tracking Purpose					
Budget Allotted Budget H No		Available Budget (current status)		Advance Amount Received' (Approved)		Entered & Verified Signature of Unit Head
						Signature:
For Accounts Department use :-						
Date of Dr: Cr:	entry passed:-				Initia	l:-