



VISHAL JUNNAR SEVA MANDAL'S
**VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION & RESEARCH**

Dr. S. L. Jadhav
Principal

Ale, Tal. Junnar, Dist. Pune-412411 | Contact No. : 9892376014 | E-mail : vjism.principal@gmail.com | Website: www.viperale.com

P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

6.3.2.1

**Number of teachers provided with financial support to attend
conferences/workshops and towards membership fee of
professional bodies during the last five years**

VISHAL JUNNAR SEVA MANDAL'S

**VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION & RESEARCH**

Dr. S. L. Jadhav
Principal

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(Signature)
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411



VISHAL JUNNAR SEVA MANDAL'S
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I

E-COPY OF LETTER/S INDICATING FINANCIAL ASSISTANCE TO TEACHERS:



VISHAL JUNNAR SEVA MANDAL'S
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Dr. S. L. Jadhav
Principal

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P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

2021-22

**Number of Teachers Provided with Financial
Support = 00**



VISHAL JUNNAR SEVA MANDAL'S
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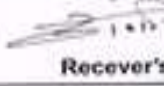
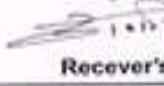
P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

2020-21

**Number of teachers provided with financial
support = 02**

E-COPY OF LETTER/S INDICATING FINANCIAL ASSISTANCE TO TEACHERS

1. MR. S. R. THANGE

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff Training Exp.</u>		Voucher No. :	
Shri <u>Thange S.R.</u>		C. B. F. :	
		Date : <u>11/9/21.</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training Exp.	600	00
	Paid to Mr. Thange & Mr. Kumbhar for attend one week seminar.		
	TOTAL	600	00
Rupees (in words) <u>Six Hundred only</u>		received by Cash/Cheque	
 Principal	 Secretary	 Cashier/Accountant	 Receiver's Signature




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ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff Training Exp.</u> Shri <u>Thangaraj S.R.</u>		Voucher No. : _____ C. B. F. : _____ Date : <u>11/9/21.</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training Exp.	600	00
	Paid to Mr. Thangaraj & Mr. Kumbhar for attend one week seminar.		
	TOTAL	600	00
Rupees (in words) <u>Six Hundred only</u>		received by Cash/Cheque	
 Principal	Secretary	 Cashier/Accountant	 Receiver's Signature




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**VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION & RESEARCH**

Dr. S. L. Jadhav
Principal

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P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

2019-20

**Number of teachers provided with financial
support = 11**

1. MR. S. S. KADAM

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff Training exp etc</u>		Voucher No. :	
Shri <u>Kadam S.S.</u>		C. B. F. :	
		Date : <u>22/02/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training exp	720	00
	paid reg. fee & travelling exp to		
	Mr. Kadam S.S. for attend seminar		
	at Shirur etc.		
TOTAL		720	00
Rupees (in words) <u>seven hundred Twenty</u>		received by Cash/Cheque	
Principal <u>[Signature]</u>		Receiver's Signature <u>[Signature]</u>	
Secretary		Cashier/Accountant	

SAVITRIBAI PHULE PUNE UNIVERSITY SPONSORED SEMINAR	
ON 1 st AND 2 nd February 2019	
Organized By : SCSSS's SITABAI THITE COLLEGE OF PHARMACY, Shirur, Pune - 412210	
RECEIPT No. : <u>159</u>	Date : <u>1st February 2019</u>
Received with thanks from Dr./Mr./Mrs./Ms. <u>Sochin Kadam</u>	
Rupees (in words) <u>Two Hundred only</u>	
by cash as SEMINAR registration fees.	
Rs. <u>200/-</u>	<u>[Signature]</u> Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Mr. Kadam S.S. Designation Asst. Prof. Department Pharma. Chemistry

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Tax fare Rs. Ps.	Postage & Jan(Tel) /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
11/2/19	Ale Phata.	8.00 a.m.	Shirur	9.45 a.m.	130.00				130.00
	Shirur		Ale Phata		130.00				130.00
	Ale Phata		Shirur		130.00				130.00
	Shirur		Ale Phata		130.00				130.00

Grant Total of Exp. (in words) Rs. five hundred twenty. 520.00.

Examine here only additional or unusual expenses:

Traveller's Signature [Signature]

Checked by: [Signature]

Approved: [Signature]

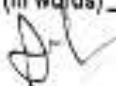
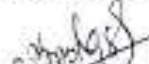
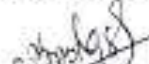
PRINCIPAL.

Amount Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveler	Balance Paid/Received by



[Signature]
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

2. DR. G.S DHOBALE (DR. G .A. LOGHE)

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff training exp etc.</u>		Voucher No. :	
Shri <u>G.A. Lobhe</u>		C. B. F. :	
		Date : <u>25/03/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp etc.	560	00
	Paid to travelling bill to miss G.A. Lobhe for attending meeting at S.P.D.O. Pune.		
	TOTAL	560	00
Rupees (In words) <u>Five hundred sixty.</u>		received by Cash/Cheque	
 Principal		 Secretary	
		 Cashier/Accountant	
		 Receiver's Signature	




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VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TAL-JUNNAR DIST-PUNE 412411

UNIVERSITY OF PUNE

TRAVELLING ALLOWANCE BILL

Sl. No. _____
Cash/Cheque No. _____
Date: _____

(1) Name: Dr. Lohhe G.A
(2) Address: V55M1 VIKER A/c
(3) Purpose of Journey: Vidyaarthi, Vikas Budget 2018-19
(4) Nature of the Committee: S.M. Officer
(5) Name of the College: VIKER A/c
(6) Designation (in case of employee): ASSO. Prof

(7) Date of business: 22/3/19
(8) Date: 15.5.2019
(9) Date of business: 22/3/19
(10) Date: 15.5.2019

Certificates and Declaration

(1) I hereby declare that no travelling allowance from any public or semi-public authority for a part or whole of the journey in respect of the bill is claimed by me.
(2) I further declare that I have travelled via _____ by Railway by 1st class/first class S.T./Private car (along with other members) and performed/perform the return journey in the same manner.
(3) I have not availed of any Railway concession.
(4) I hereby certify that board & lodging were not availed free of charge by the Government of the Conference/Seminar.
(5) I was appointed as a member of Travel Inquiry Committee a delegate visit University centre No. _____
(6) The report of the L.I.C. is enclosed.

Signed (claimant): [Signature]

(7) Certified that Shri _____ was asked to go to the centre(s)/Seminar(s) to _____ The dates & filing mentioned in the claim are verified and found correct.
(8) The dates mentioned in this claim are verified with the programme.

Signed: _____
Section Officer In-Charge: _____
(PTO)

Particulars of Journey/Day		Arrival		Type of Journey	Distance Travelled	Ticket No. and Date for	Travel/Bus Fare	D.A.	Total
Time	Station	Date	Time	Train/Bus/Car/Air/Class of Accommodation	In km.	by Rail or Air	10	1	2
22/3/19 6.00 AM	A/c	24/3/19 9.30 AM	6.00 PM	SPRU	130 km	155/-	120/-	120/-	155/-
22/3/19 3.00 PM	SPRU	24/3/19 6.00 PM	A/c	SPRU	130 km	155/-	120/-	120/-	155/-
Grand Total							560/-		560/-

Budget Head: _____
Code No.: _____
TO BE RECEIVED IN ADVANCE
Payment Received _____
Receipt _____
Rs. 5100/-

By: _____
Exam. _____

Note: Please use the backside of the bill, if the space is insufficient for writing allowance bill (part 2007)

Paid for Rs. 560/-
(Rupees Five hundred sixty only)
Date: 22/3/19

S.O. (Bill)
S.O. (Audit)
F.O./D.F.O.
A.F.O.

Pay Rs. 560/-



[Signature]
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VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TAL-JUNNAR DIST-PUNE 410411

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 04/02/2019	
Debit <u>staff training exp ale</u> Shri <u>Dr. Lakhe mam</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	by Staff training exp ale	920	00
	paid to Mr. Radhau & Mrs. Lakhe for		
	attend seminar at Ghirur Ctg.		
	TOTAL	920	00
Rupees (in words) <u>Nine hundred Twenty.</u> received by Cash/Cheque			
 Principal		 Receiver's Signature	
 Secretary		 Cashier/Accountant	



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 VISHAL INSTITUTE OF PHARMACEUTICAL
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 ALE TAL-JUNNAR DIST-PUNE 412411

SAVITRIBAI PHULE PUNE UNIVERSITY SPONSORED SEMINAR
ON 1st AND 2nd February 2019

Organized By :
SCSS's SITABAI THITE COLLEGE OF PHARMACY,
Shirur, Pune - 412210

RECEIPT No. : 152

Date : 1st February 2019

Received with thanks from Dr./Mr./Mrs./Ms. Gayatri Apparao Lohhe

Rupees (in words) Two Hundred only

by cash as SEMINAR registration fees.

Rs. 200/-


Signature




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VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Dr. Lobhe Gayatri Apparao Designation Associate Prof Department Pharm Chemistry

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Tax fare		Postage & Telegram /Rail Reservation		Conveyance		D.A. with/without Supporting		Total
					Rs.	Paise	Rs.	Paise	Rs.	Paise	Rs.	Paise	
11/2/19	Ale	7:00 am	SCSSS	9:30	130	00							130 00
Fri	SCSSS Col Shirur	4:45 pm	Ale	7:00	130	00							130 00
21/2/19	Ale	7:00 am	SCSSS	9:30	130	00							130 00
Sat	SCSSS Col Shirur	4:00 pm	Ale	7:00	130	00							130 00

Grant Total of Exp. (in words) Rs. Five Hundred Rs Only 520.00

Explain here only additional or unusual expenses

Traveller's Signature Gayatri

Checked by: [Signature]

Approved: [Signature]

PRINCIPAL

Amount Advance	
Less Amount spent as per T.A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	



[Signature]
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 ALE TAL-JUNNAR DIST-PUNE 412411



Progressive Education Society's
MODERN COLLEGE OF PHARMACY

Accredited by 'NAAC'

'Best College Award' by Savitribai Phule Pune University



Approved by All India Council for Technical Education, New Delhi, Pharmacy Council of India, New Delhi,
Directorate of Technical Education, Mumbai (MS), Permanently affiliated to
Savitribai Phule Pune University, Pune & Approved under Section (2 (f) & 12 (B) of UGC Act, 1956)

Sector No. 21, Yamunanagar, Nigdi, Pune - 411 044. (M.S.) Tel. : 020-27661315 Fax : 020-27661314

E-mail : mcpnigdi44@gmail.com Website : www.mcop.org.in

Prof. Dr. P. D. Chaudhari
M.Pharm., Ph.D.
Principal

Prof. Dr. Gajanan R. Ekbote
M.S., M.N.A.M.S.
Chairman, Business Council
P.E.Society, Pune

Ref. :

Date :

RECEIPT

RECEIPT NO. : - INT/SEM - 130

DATE : 04/01/2019

Received with thanks from Dr./Shri./Smt. : Dr. Lobhe G.A.

The sum of Rupees : RS. 2000/- [Rs. Two Thousand Only.]

on account of Registration for Savitribai Phule Pune University sponsored
International Conference on Multidisciplinary Healthcare Research :
Challenges, Opportunities And Newer Directions.

By Cash/NEFT No. - SBIN519001610983 dated : 01/01/2019
[Rs. 8000/-]
Bank Name : -



[Signature]
Accountant

STRIVING TOWARDS EXCELLENCE FOREVER



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Vishal Institute of Pharmaceutical Education & Research
 Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. : _____

C. B. F. : _____

Date : 23/2/21

Debit Staff training exp all

Shri Dr. S.M. Dhobale

Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp all.	9100	00
	paid staff registration fee for international conference 1300 x 7 staff.		
	TOTAL	9100	00

Rupees (in words) Nine thousand one hundred only

Principal

Secretary

Cashier/Accountant

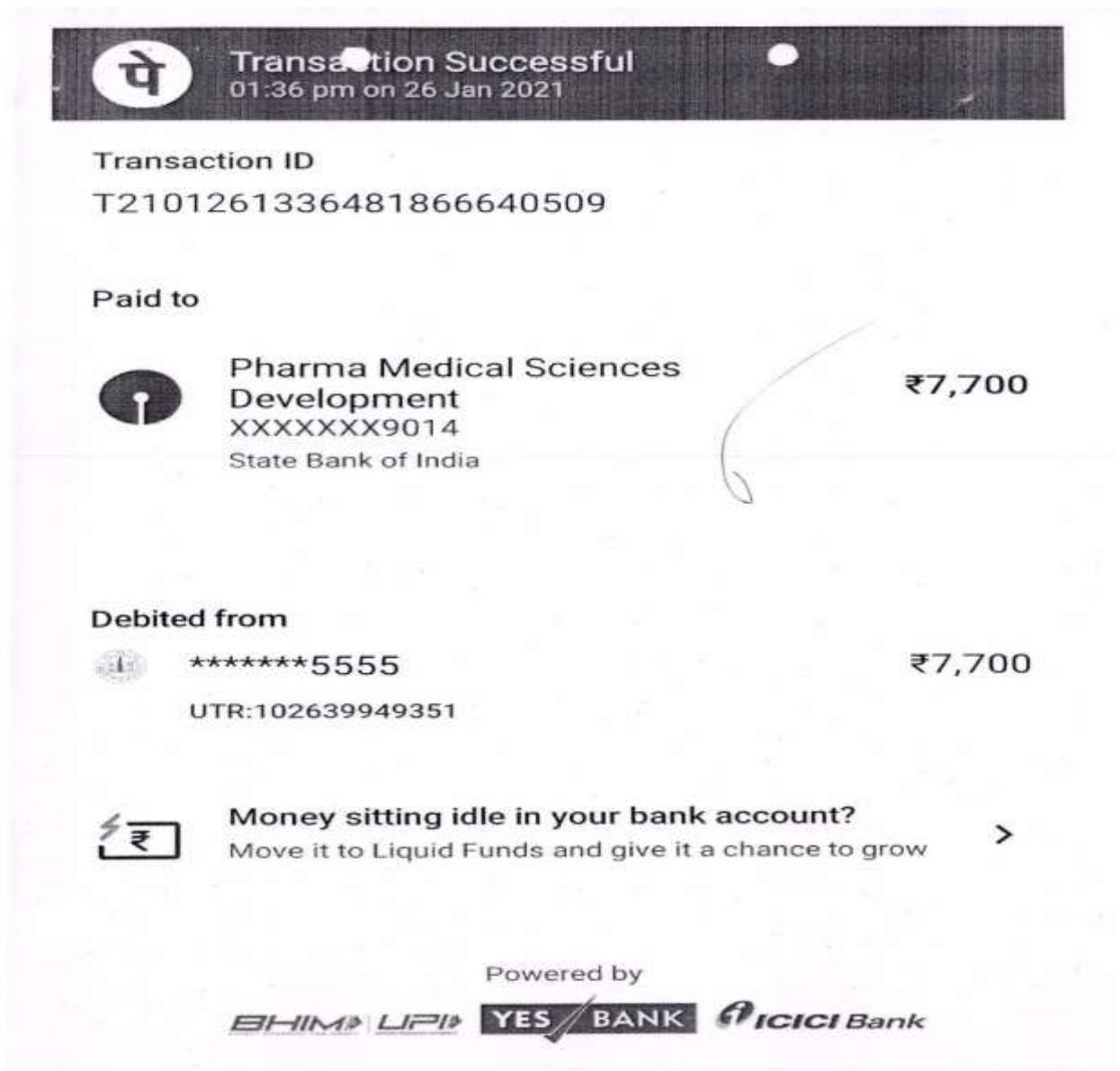
received by Cash/Cheque
Receiver's Signature




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 Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 12/12/2020	
Debit <u>Staff training exp etc.</u> Shri <u>Shobale S.M.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp etc.	548	00
	paid dinner bill to Dr. S.M. Shobale for poster presentation at pune.		
	TOTAL	548	00
Rupees (in words) <u>Five hundred forty eight only</u>		received by Cash/Cheque	
Principal Secretary Cashier/Accountant		Recover's Signature	




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 ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 ALE (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Dr. S. M. Dhobale Designation Asst. Prof. Department Pharmaceutics.

Date	Transport From	Depart Time	Transport to	Arrival Time	Train S.T./Tax fare Rs. Ps.	Postage & Temp/Te /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
22/03/2019	Alephata	8.30	Sinnar	10.50	90 = 00				90 = 00
	Sinnar	10.50	Sci Tech (Musalgaon)	11.10	80 = 00			100 = 00	120 = 00
	Sci Tech (Musalgaon)	11.40	Sinnar put Ltd.	11.50	40 = 00				40 = 00
	Sinnar Put Ltd.	12.20	Sinnar	12.45	80 = 00				140 = 00
	Sinnar	12.45	Alephata	2.00	90 = 00				500 = 00

Grant Total of Exp. (in words) Rs. Five Hundred Rupees only

Explain here any additional or unusual expenses

Traveller's Signature [Signature]
 Checked by: [Signature]
 Approved: [Signature]
 PRINCIPAL

Amount Advance	
Less Amount spent as per T.A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	



[Signature]
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 ALE TAL-JUNNAR DIST-PUNE 412411

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE-412411

**STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS**

FEBRUARY 26 & 27, 2019

Receipt No. :01
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs Dr. Shantanu M. Dhobale

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

Signature of Principal 

B.J.Arts, Commerce & Science College
Ale, Tal. Junnar, Dist. Pune-412411



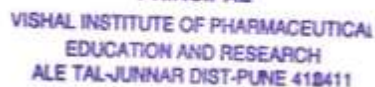


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VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411



Prof. Dr. Gajanan R. Ekbote
M.S., M.N.A.M.S.
Chairman, Business Council
P.E.Society, Pune

Date: _____



4. DR. M. V. GADHAVE

Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>staff training exp. etc.</u>		Voucher No. :	
Shri <u>Gadhav sir</u>		C. B. F. :	
		Date :	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp etc	500	00
	Paid staff registration fee for attend seminar at Nectan college of pharmacy.		
	TOTAL	500	00
Rupees (in words) <u>five hundred only</u>		received by Cash/Cheque	
Principal		Secretary	Cashier/Accountant
		Receiver's Signature	

Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>staff training exp etc.</u>		Voucher No. :	
Shri		C. B. F. :	
		Date : 11/09/2019	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp etc.	2500	00
	Paid staff registration fees for attend seminar at nectan college of pharmacy.		
	TOTAL	2500	00
Rupees (in words) <u>Two thousand five hundred</u>		received by Cash/Cheque	
Principal		Secretary	Cashier/Accountant
		Receiver's Signature	



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

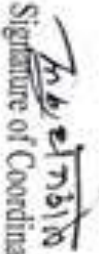
DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE-412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019
Receipt No. :02
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Mrs. V. V. Godhore

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

Signature of Principal
B. J. Arts, Commerce & Science College
Ale, Tal. Junnar, Dist. Pune, Pin-412411





PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411


Progressive Education Society's
MODERN COLLEGE OF PHARMACY
 Accredited by 'NAAC'
 'Best College Award' by Savitribai Phule Pune University

Approved by All India Council for Technical Education, New Delhi, Pharmacy Council of India, New Delhi,
 Directorate of Technical Education, Mumbai (MS), Permanently affiliated to
 Savitribai Phule Pune University, Pune & Approved under Section (2 (f) & 12 (B) of UGC Act, 1956)
 Sector No. 21, Yamunanagar, Nigdi, Pune - 411 044, (M.S.) Tel. : 020-27661315 Fax : 020-27661314
 E-mail : mcopnigdi44@gmail.com Website : www.mcop.org.in

Prof. Dr. P. D. Chaudhari
 M.Pharm., Ph.D.
 Principal

Prof. Dr. Gajanan R. Ekbote
 M.S., M.N.A.M.S.
 Chairman, Business Council
 P.E.Society, Pune

Ref. : _____ Date : _____

RECEIPT

RECEIPT NO. : - INT/SEM - 124, DATE : 04/01/2019
 Received with thanks from Dr./Shri./Smt. : *Dr. Godhare M.V.*

 The sum of Rupees : **RS. 2000/-** [*Two ~~Thousand~~ Thousand Only.*]
 on account of **Registration for Savitribai Phule Pune University sponsored**
International Conference on Multidisciplinary Healthcare Research :
Challenges, Opportunities And Newer Directions.

By Cash/NEFT No. - *SBIN519001610983* Dated : *01/01/2019*
 Bank Name : - *(Rs. 8000/-)*



 Accountant

STRIVING TOWARDS EXCELLENCE FOREVER




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit _____		Voucher No. : _____	
Shri <u>Tadhar S.L. Gaikwad D.D.</u>		C. B. F. : _____	
		Date <u>30/01/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	pct conference, Nasik	2000	00
TOTAL		2000	00
Rupees (In words) <u>Two thousand only</u>		received by Cash/Cheque	
Principal 	Secretary 	Receiver's Signature 	
Cashier/Accountant 			


PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411



Mahatma Gandhi Vidyamandir's
Pharmacy College
Mumbai Agra Road, Panchavati, Nashik - 422 003

RECEIPT BOOK

No. 058 Date: 29/1/2019
Name: Dr. Gaikwad D.D.
Address: V.I.P.E.R. Class: _____

Particular	Rs.	Ps.
PCT	1000/-	
conference		
Cash		
Total	1000/-	

Rupees One Thousand only

[Signature]
Cashier

Vishal Junnar Seva Mandal's
Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

Debit staff training exp etc
Shri Dr. D.D. Gaikwad Sir

DEBIT VOUCHER
Voucher No. : _____
C. B. F. : _____
Date : 7/1/19

Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training exp etc	2000	00
	paid registrat ⁿ fees to Mr. Gaikwad Sir		
	for attend conference at modern cly		
	of phar. Nigdi.		
	TOTAL	2000	00

Rupees (in words) Two thousand only received by Cash/Cheque

[Signature] Principal *[Signature]* Secretary *[Signature]* Cashier/Accountant *[Signature]* Receiver's Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411


Progressive Education Society's
MODERN COLLEGE OF PHARMACY
 Accredited by 'NAAC'
 'Best College Award' by Savitribai Phule Pune University

Approved by All India Council for Technical Education, New Delhi, Pharmacy Council of India, New Delhi,
 Directorate of Technical Education, Mumbai (MS), Permanently affiliated to
 Savitribai Phule Pune University, Pune & Approved under Section (2 f) & 12 (B) of UGC Act, 1956
 Sector No. 21, Yamunanagar, Nigdi, Pune - 411 044. (M.S.) Tel. : 020-27661315 Fax : 020-27661314
 E-mail : mcpnigdi44@gmail.com Website : www.mcop.org.in

Prof. Dr. P. D. Chaudhari
 M.Pharm., Ph.D.
 Principal

Prof. Dr. Gajanan R. Ekbote
 M.S., M.N.A.M.S.
 Chairman, Business Council
 P.E.Society, Pune

Ref. : _____ Date : _____

RECEIPT

RECEIPT NO. : - INT/SEM - 146 DATE : 04/01/2019
 Received with thanks from Dr./Shri./Smt. : *Dr. D.D. Gaikwad*.

The sum of Rupees : *RS. 2000/- [Two Thousand Only.]*
 on account of **Registration for Savitribai Phule Pune University sponsored**
International Conference on Multidisciplinary Healthcare Research :
Challenges, Opportunities And Newer Directions.

By Cash/NEFT No. - *By Cash* Dated : *05/01/2019*
 Bank Name : -



 Accountant

STRIVING TOWARDS EXCELLENCE FOREVER




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 418411

34353637



Vishal Junnar Seva Mandal's
Vishal Institute of Pharmaceutical Education & Research
 Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. : _____

C. B. F. : 11/1/2019

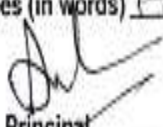
Date : 11/1/2019

Debit 11/1/2019 Training Ale

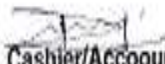
Shri _____

Sr. No.	Particulars of Payment	Amount	
		Rs.	Ps.
	By 11/1/2019 Training Ale	8000	00
	By Bank charges Ale	2	95
	paid Reg. Fee for attend Seminar at modern college of pharmacy pune.		
	TOTAL	8002	95

Rupees (in words) Eight Thousand Two Rs. Ninety Five P. only received by Cash/Cheque


Principal


Secretary


Cashier/Accountant


Receiver's Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

Counterfoil

State Bank Of India

Date: 1/1/2019

Received from:

Vishal Inst. Of Pharma. Edu. Res.

By Cheque/Transfer

for RTGS/NEFT

on The -Bank of Maharashtra

IFSC Code: MAHB0001132

Branch: Yamunanagar Pune

Favouring: PES Modern College of Pharmacy

A/C No.: 20124100370

Message for recipient:

.....

Amount Rs.8000.00

Charges Rs. 2.95

Total Rs - 8002.95

(Total Rupees in words)

Eight Thousand Two Rs.Ninety Five Paise

.....

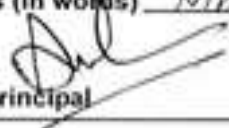
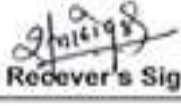
IFSC CODE NO.

SBIN0015850




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

6. MR. S. T. TAMBE

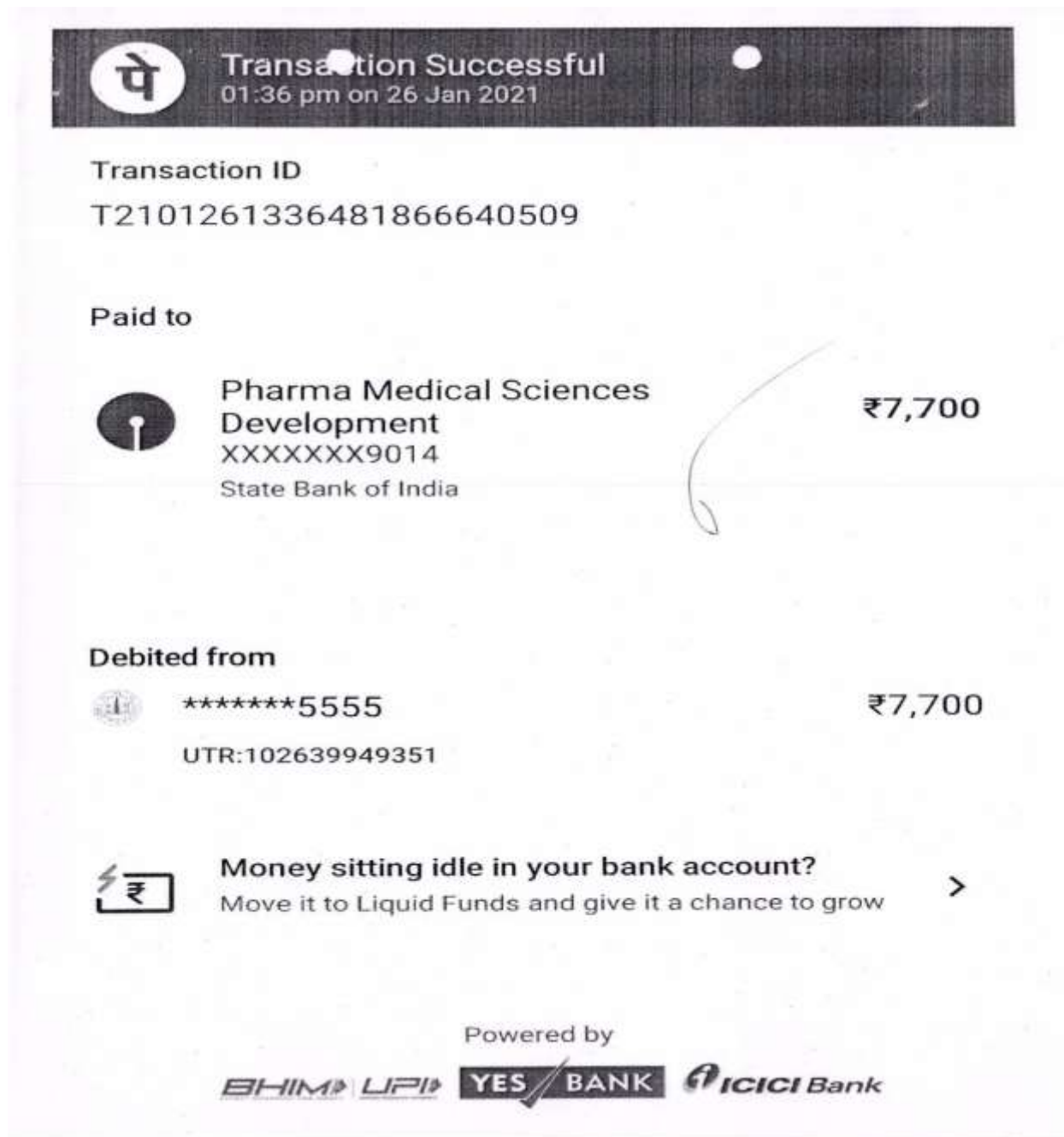
 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 23/2/21	
Debit <u>Staff training exp. etc.</u> Shri <u>Dr. S. M. Dhobale</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp. etc.	9100	= 00
	paid staff registration fee for international conference 1300 X 7 staff.		
TOTAL		9100	= 00
Rupees (in words) <u>Nine thousand one hundred only</u>		received by Cash/Cheque	
 Principal		 Secretary	
 Cashier/Accountant		 Receiver's Signature	




PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
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 ALE TAL-JUNNAR DIST-PUNE 412411



PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411



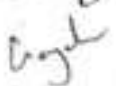
[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Mula Education Society's
College Of Pharmacy, Sonai
VP: Sonai, Tal: Newasa, Dist: Ahmednagar
Maharashtra, India-414105

Receipt No. 721 Date 5/2/2019
Mr./Miss./Mrs./Dr. Tambe Sujit Lakaram

Sr. No.	Particulars	Amount
1	International level Seminar	
2	National level Seminar	350/-
3	State level Seminar	
4	Others	
	Total	850/-

Received Rupees (In Words) Three five 8000



 Receiver's Sign.




PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

7. DR. S. L. JADHAV

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE-412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019
Receipt No. :03
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Jadhav Suresh H.

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

Signature of Principal 
B.J.Arts,Commerce & Science College
Ale,Tal.Junnar Dist.Pune.Pin-412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

7.

SAVITRIBAI PHULE PUNE UNIVERSITY SPONSORED SEMINAR
ON 1st AND 2nd February 2019

Organized By :
SCSS's SITABAI THITE COLLEGE OF PHARMACY,
Shirur, Pune - 412210

RECEIPT No. : 153

Date : 1st February 2019

Received with thanks from Dr./Mr./Mrs./Ms. Suresh laxman Jadhav

Rupees (in words) Two Hundred only

by cash as SEMINAR registration fees.

Rs. 200/-

Signature 




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Mahatma Gandhi Vidyamandir's
Pharmacy College
Mumbai Agri Road, Panchavati, Nashik - 422 003
RECEIPT BOOK

No. 057 Date: 29/1/2019
Name: Dr. Jadhav Suresh
Address: V.T.P.E.P. Institute

Particular	Rs.	Ps.
PCT conference cash	1000/-	
Total	1000/-	

Rupees One Thousand Only

[Signature]
Cashier



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411


Progressive Education Society's
MODERN COLLEGE OF PHARMACY
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Approved by All India Council for Technical Education, New Delhi, Pharmacy Council of India, New Delhi,
 Directorate of Technical Education, Mumbai (MS), Permanently affiliated to
 Savitribai Phule Pune University, Pune & Approved under Section (2 (f) & 12 (B) of UGC Act, 1956)
 Sector No. 21, Yamunanagar, Nigdi, Pune - 411 044, (M.S.) Tel. : 020-27661315 Fax : 020-27661314
 E-mail : mcpnigdi44@gmail.com Website : www.mcop.org.in

Prof. Dr. P. D. Chaudhari
 M.Pharm., Ph.D.
 Principal

Prof. Dr. Gajanan R. Ekbote
 M.S., M.N.A.M.S.
 Chairman, Business Council
 P.E. Society, Pune

Ref. : _____ Date : _____

RECEIPT

RECEIPT NO. : - INT/SEM - 125
 DATE : 04/01/2019

Received with thanks from Dr./Shri./Smt. : Dr. Jadhav S. L.

The sum of Rupees : RS. 2000/- [Two Thousand Only]
 on account of Registration for Savitribai Phule Pune University sponsored
 International Conference on Multidisciplinary Healthcare Research :
 Challenges, Opportunities And Newer Directions.

By Cash/NEFT No. - SBIN5190001610983 Dated : 01/01/2019
 Bank Name : - [Rs. 8000/-]


 Accountant -

STRIVING TOWARDS EXCELLENCE FOREVER




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

8. MR. KIRAN THORAT

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 29/02/2022	
Debit	Staff training exp etc.		
Shri	K. Thorat K.P.		
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp etc.	300	00
	paid registered fees to Mr. Thorat K.P. at Sonai College		
	TOTAL	300	00
Rupees (in words) <u>Three hundred only.</u>		received by Cash/Cheque	
Principal	Secretary	Cashier/Accountant	Receiver's Signature

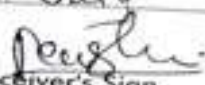



PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411


Vishal Education Society's
College Of Pharmacy, Sonai
VP. Sonai, Tal: Newasa, Dist: Ahmednagar
Maharashtra, India-414105

Receipt No. 216 Date 24/02/2020
Mr/Miss/Mrs./Dr. Thorat Kiran

Sr. No.	Particulars	Amount
1	International level Seminar	
2	National level Seminar	
3	State level Seminar	
4	Others	
	Registration fee for Workshop on analytical instruments Handling	300
Total		300

Received Rupees (In Words) Three hundred only
pay rs 300/-
Receiver's Sign. 




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : _____ C. B. F. : _____ Date : 10/10/19	
Debit <u>Staff training xp</u> Shri <u>Thangar S.R.</u>			
Sr. No.	Particulars of Payment	Amount Rs. Ps.	
	By <u>staff training xp</u>	480	00
	<u>paid to Mr. Thangar S.R. For attend</u>		
	<u>Seminar at Ginnar</u>		
	TOTAL	480	00
Rupees (in words) <u>Four hundred eighty</u>		received by Cash/Cheque 	
Principal	Secretary	Cashier/Accountant	Receiver's Signature

RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED

Date 08/10/2019

No.

Received with thanks from Thangaraj Somnath Rautale

the sum of Rupees Two hundred only

— X — By cheque / cash / draft

in full / part / advance payment of A/c of PSES College of Pharmacy (for women)

Rs. 200/-

Sd/-
Signature

Receipt valid subject to Realisation of Cheque

RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Vishal Institute of Pharmaceutical Education & Research
ALE, Tal. Junnar, Dist. Pune - 412411.

TRAVELLING EXPENSE BILL

Name: Mr. Thange S. A. Designation: Assistant Professor Department: Pharmacy

Date	Transport From	Depart Time	Transport to	Arrival Time	Train S.T./Taxi fare Rs. Ps.	Postage & Telegram /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
21/07/18	WILSON	6.00	SINHA	1.30	140 00			200 00	340 00
21/07/18	WILSON	5.30	PRC	8.00	140 00				140 00
					280			200	480

Grant Total of Exp. (in words) Rs. Four hundred eighty only.

Explain here only additional or unusual expenses

Traveller's Signature: [Signature]

Checked by:

Approved - [Signature]

PRINCIPAL

Amount Advance	Rs. Ps.
Less Amount spent as per T. A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411



Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>staff training exp etc</u>		Voucher No. :	
Shri <u>Thange S.R.</u>		C. B. F. :	
		Date : <u>12/02/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training exp etc	1280	= 00
	paid reg fees & travelling exp to		
	Mr. Thange for attend seminar at		
	Ami clg.		
TOTAL		1280	= 00
Rupees (in words) <u>one thousand two hundred eight</u>		received by Cash/Cheque	
Principal <u>[Signature]</u>		Secretary <u>[Signature]</u>	
Cashier/Accountant <u>[Signature]</u>		Receiver's Signature <u>[Signature]</u>	

No. <u>57</u>	Date: <u>08/02/19</u>
State level seminar	
RECEIVED with thanks from <u>Thange Samrath</u>	
the sum of Rupees <u>Three hundred Rs only</u>	by cheque / draft / cash in full / part advance
payment of our Bill No. <u>08/02/19</u> / A/c of <u>(Three hundred Rs only)</u>	
₹ <u>200/-</u>	Signature <u>[Signature]</u>
This receipt is valid subject to Realisation of cheque.	

[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411



VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
VISHAL JUNNAR SEVA MANDAL'S
Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Thengge Sumanth Ramesh Designation Assistant Professor Department pharmacy

Date	Transport From	Depart Time	Transport to	Arrival Time	Train S.T./Tax fare		Postage & Train/Rail Reservation		Conveyance		D.A. without Supporting		Total	
					Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.
6/2/19	Ale	6:00 AM	Loni	10:00 AM	120	20	-	-	-	-	100	20	-	-
6/2/19	Loni	5:00 PM	Ale	8:00 PM	120	20	-	-	-	-	-	-	-	-
7/1/19	Ale	6:30 AM	Loni	10:00 AM	120	20	-	-	-	-	-	-	-	-
7/1/19	Loni	5:00 PM	Ale	8:00 PM	120	20	-	-	-	-	100	20	-	-
													Grand Total 680.20	

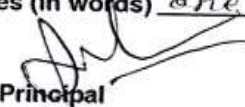
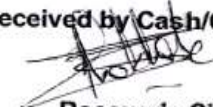
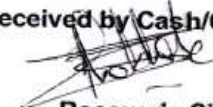
Grant Total of Exp. (In words) Rs. Six hundred eighty only. not change etc

Explain here only additional or unusual expenses	Traveller's Signature <u>[Signature]</u>	Amount Advance
	Checked by:	Less Amount spent as per T.A. Bill
	Approved:	Balance Payable to Institute/Traveller 680.20
	PRINCIPAL <u>[Signature]</u>	Balance Paid/Received by



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

10. MISS B. D. CHORDIYA

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER Voucher No. : C. B. F. : Date : 30/9/2019	
Debit <u>staff training exp a/c.</u> Shri <u>chordiya B.D.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp a/c.	1800	= 00
	paid to chordiya B.D. for attend seminar at Allana college.		
	TOTAL	1800	= 00
Rupees (in words) <u>one thousand eight hundred only</u> received by Cash/Cheque			
Principal 		Secretary 	
		Cashier/Accountant 	
		Receiver's Signature 	




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JYOTI SEVA MANDALS
Vishal Institute of Pharmaceutical Education & Research
ALE, Tal. Junnar, Dist. Pune - 412411.

TRAVELLING EXPENSE BILL

Name: Miss. Chhotiya B.D. Designation: Asst. Professor Department: QAT

Date	Transport From	Date	Transport to	Arrival Time	Train S.T./Taxi fare Rs. Ps.	Postage & Train/Te Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D. A. with/without Supporting Rs. Ps.	Total Rs.
23/9/2019	Narayangan	6:30 am	Pune (Shivajinagar)	8:30 am	100/-				
	Pune (Shivajinagar)	8:45 am	MCS SOCIETY AWARE COP	9:20 am (BY Cab)	200/-				
	MCS SOCIETY AWARE COP	2:30 pm	Shivajinagar	3:15 pm (BY Cab)	200/-				
	Shivajinagar (Pune)	4:00 pm	Narayangan	7:00 pm	100/-				
					<u>600/-</u>				

Grant Total of Exp. in words: Eighteen Hundred Only Six Only.

Rs. 1800/-

Traveller's Signature: _____

Checked by: _____

Approved -
PRINCIPAL: _____

Amount/Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveller	Balance Paid/Received by




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

DN VINESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE-412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019
Receipt No. :04
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Chandya Chakr

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator

Signature of Principal
B.J. Arts, Commerce & Science College
Ale, Tal. Junnar, Dist. Pune-412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

11. MR. S. G. PATEL

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff training exp etc.</u>		Voucher No. :	
Shri <u>patel S.G.</u>		C. B. F. :	
		Date : <u>26/09/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs. Ps.	
	By Staff training exp etc.	1500	00
		1500	00
	Paid reg. fee & T.A. D.A. to Mr. Patel S.G.		
	TOTAL	1500	00
Rupees (in words) <u>one thousand one five hundred.</u>		received by Cash/Cheque	
Principal <u>[Signature]</u>		Secretary <u>[Signature]</u>	
Cashier/Accountant <u>[Signature]</u>		Receiver's Signature <u>[Signature]</u>	

Registration Fee Receipt	
Cash Received from <u>VIPER</u>	Date: <u>25/09/19</u>
Registration fees towards Nugar Pharma Tech Fest-2019 state level Competition.	
Mode of payment: Cash/ Online/ <u>—</u>	
Rs. <u>1200/-</u>	Signature of Receiver <u>[Signature]</u>

200 per team
total team 6
 $200 \times 6 = 1200/-$



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research

VISHAL JUNNAR SEVA MANDALS

ALE, Tal. Junnar, Dist. Pune - 412411.

TRAVELLING EXPENSE BILL

Name: prof. potel S. V Designation: Asst prof Department: MCA

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S. T/Taxi fare Rs. Ps.	Postage & Tem/Tel /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D. A. with/without Supporting Rs. Ps.	Total Rs. Ps.
25/11/20	V. S. P. E. R. Ale	07:20 am	PDVUPET C.O.P Ahmednagar	09:30 am	—	—	—	—	P. R. A
									1500/-

Grant Total of Exp. (in words) Rs. fifteen hundred rupees only

Explain here only additional or unusual expenses

Traveller's Signature :

Checked by :

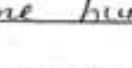
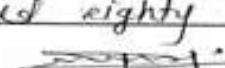
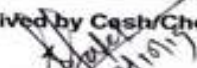
Approved -

PRINCIPAL -

Amount Advance	Rs.	Ps.
Less Amount spent as per T. A. Bill	Rs.	Ps.
Balance Payable to Institute/Traveller	Rs.	Ps.
Balance Paid/Received by	Rs.	Ps.



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>By Staff training exp etc.</u> Shri <u>patel s.g.</u>		Voucher No. : _____ C. B. F. : _____ Date : <u>12/10/19</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	<u>By Staff training exp etc.</u>	<u>985</u>	<u>00</u>
	<u>paid lunch & dinner bill to Patel s.g.</u>		
	<u>at time of I.V.</u>		
	TOTAL	<u>985</u>	<u>00</u>
Rupees (in words) <u>Nine hundred eighty five</u>		received by Cash/Cheque <u>12/10/19</u>	
 Principal	 Secretary	 Cashier/Accountant	 Receiver's Signature



Vishal Institute of Pharmaceutical Education & Research
 Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. : _____

C. B. F. : _____

Date : 07/03/2019

Debit Staff training exp. etc.

Shri Sagar - print Arts - Patel S.G.

Amount

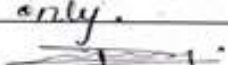
Rs. _____ Ps. _____

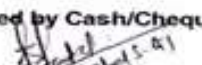
Sr. No.	Particulars of Payment	Rs.	Ps.
	By Staff training exp etc.	600	00
	paid registrat ⁿ fees to miss phalke p.l.		
	& mr. patel s.g.		
	TOTAL	600	00

Rupees (in words) Six hundred only.

received by Cash/Cheque


Principal

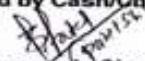

Secretary


Cashier/Accountant

Receiver's Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>staff training exp etc.</u>		Voucher No. : _____	
Shri <u>patel s.g.</u>		C. B. F. : _____	
		Date : <u>11/02/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	Training exp etc.	2700	00
	paid reg. fees travelling exp		
	to patel s.g., phalke chordia		
	for attend seminar at foni etc.		
	TOTAL	2700	00
Rupees (in words) <u>Two thousand seven hundred.</u>		received by Cash/Cheque _____	
Principal	Secretary	 Cashier/Accountant	 Receiver's Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Savitribai Phule Pune University, Pune sponsored
Two Day National Level Seminar on
**“CURRENT PROSPECTS OF HERBAL NUTRACEUTICAL
AS A FUNCTIONAL FOOD AND DIETARY SUPPLEMENT”**
Organized by PRES's Pravara Rural College of Pharmacy, Pravaranagar

No.: 284 RECEIPT Date: - 08/02/2019

Received with thanks from Mr./Mrs./Dr./Prof./... Dated Salim Gaber
From Alphata, VIPER Contact :
A Sum of Rupees. four hundred only Rs. 400/-
By Cash/ Cheque/ DD No.- [Signature]
Receiver Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEVA MANDAL
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Mr. Patel S.G., Maharashtra P.L. Res. Society, A.D. Designation Asst. Prof. Department M.C.A. (P.G.D.)

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T. Tax fare		Postage & Telegram (Rail Reservation)	Conveyance		D.A. without Supporting		Total
					Rs.	Paise		Rs.	Paise	Rs.	Paise	
05.01.19	Ale, Tal. Junnar	7:30 am	P.K.C.O.P. Lon	9:50 am	120 x 3 = 360 = 00		-			300 = 00		1020 = 00
08.01.19	Lon, Tal. Rahata	5:40 pm	Ale Tal. Junnar	7:30 pm	120 x 3 = 360 = 00		-					
09.02.19	Ale, Tal. Junnar	7:35 am	P.K.C.O.P. Lon	10:10 am	120 x 2 = 240 = 00		-			200 = 00		480 = 00
09.02.19	Lon, Tal. Rahata	5:30 pm	Ale Tal. Junnar	8:00 pm	120 x 2 = 240 = 00		-					680 = 00

Grant Total of Exp. (in words) Rs. Fifteen hundred only 1500/-

Explain here only additional or unusual expenses	Traveller's Signature	Amount Advance	-
	Checked by :	Less Amount spent as per T.A. Bill	-
	Approved :	Balance Payable to Institute/Traveller	
	PRINCIPAL	Balance Paid/Received by	



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TALJUNNAR DIST-PUNE 412411



VISHAL JUNNAR SEVA MANDAL'S
**VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION & RESEARCH**

Dr. S. L. Jadhav
Principal

Ale, Tal. Junnar, Dist. Pune-412411 | Contact No. : 9892376014 | E-mail : vjism.principal@gmail.com | Website: www.viperale.com

P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

2018-19

**Number of teachers provided with financial
support = 18**

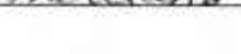
2. MR. PATEL S.G.

Vishal Institute of Pharmaceutical Education & Research		DEBIT VOUCHER	
Vishal Junnar Seva Mandal's Ale, Tal. Junnar, Dist. Pune-412411.		Voucher No. : _____	
Debit <u>staff training exp.</u>		C. B. F. : _____	
Shri <u>Mr. Patel S.G.</u>		Date : <u>24/10/2018</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp	3500	00
	paid to Mr. Patel S.G. & M. Pharm		
	students for attend Nagar Pharma		
	expo.		
	TOTAL	3500	00
Rupees (in words) <u>Three thousand Five hundred.</u>		received by Cash/Cheque	
Principal	Secretary	Cashier/Accountant	Receiver's Signature



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

	Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
	Debit <u>Staff training exp etc.</u> Shri <u>Bansode A.S.</u>		Voucher No. : _____	
			C. B. F. : _____	
			Date : <u>15/3/2019</u>	
Sr. No.	Particulars of Payment		Amount Rs.	Ps.
	By Staff training exp etc.			
	Paid to miss Bansode A.S. for		1000	00
	Industrial visit exp. as per bill.			
	TOTAL		1000	00
Rupees (in words) <u>one thousand Twenty only</u>				
 Principal			received by Cash/Cheque Receiver's Signature	
 Secretary			 Cashier/Accountant	

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>staff training exp a/c.</u> Shri <u>Bansode A.S.</u>		Voucher No. : C. B. F. : Date : <u>15/3/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp a/c.		
	paid to miss Bansode A.S. for	1020	00
	industrial visit exp. as per bill.		
	TOTAL	1020	00
Rupees (in words) <u>one thousand Twenty only</u>		received by Cash/Cheque	
 Principal	 Secretary	 Cashier/Accountant	 Receiver's Signature



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[illegible]

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VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Ms. Bonsode A-5 Designation Assistant Professor Department Pharmaceutics

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/Bus/Taxi/Fare		Postage & Telegram/Reservation		Conveyance		D.A. with/without Supporting		Total	
					Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.
25/01/19	Ale	6.00 am	Nalgonda	12.00 pm	260	00	-	-	20	-	-	-	340	00
25/01/19	Nalgonda	5.00 pm	Ale	11.00 pm	260	00	-	-	20	-	-	-	340	00
													680	00

Grant Total of Exp. (in words) Rs. Six hundred eighty rupees only

Explain here only additional or unusual expenses

Traveller's Signature [Signature]

Checked by:

Approved: [Signature]

PRINCIPAL

Amount Advance
Less Amount spent as per T.A. Bill
Balance Payable to Institute/Traveller
Balance Paid/Received by



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

Shri Gajanan Maharaj Shiksh... Prasarak Mandal's
SHARADCHANDRA PAWAR
INSTITUTE OF PHARMACY
Approved by A.I.C.T.E. & Affiliated to MSBTE, Mumbai
Otur (Dumbarwadi), Tal: Junnar, Dist: Pune. Ph: 02132-265729/ 265730

PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

4. DR. S.M. DHOBALE

40

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER Voucher No. : C. B. F. : Date : 11/10/2018	
Debit	staff travelling exp		
Shri	Mr. Dhobale S.M.		
Sr. No.	Particulars of Payment	Amount Rs. Ps.	
	By staff travelling exp	1385	00
	paid to Mr. Dhobale S.M. for		
	attend seminar at pune		
	TOTAL	1385	00
Rupees (in words) <u>one thousand Three hundred eighty five only</u> received by Cash/Cheque			
Principal	Secretary	Cashier/Accountant	Receiver's Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Dr. S.M. Dhobale Designation _____ Department _____

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/Bus/Taxi fare Rs. Ps.	Postage & Telegram Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.	
06/10/2018	Alephata 9:15 PM Ale	6:30 AM	Tathwade Pune	9:30 AM				85 = 00	85 = 00	
06/10/2018	Tathwade Jadhav Corp Tathwade	6:00 PM	VJPER Ale	9:00 PM				300 = 00	300 = 00	
					} By Private Vehicle arranged by Dhobale					
Grant Total of Exp. (in words) Rs. <u>Three Hundred Eighty Five Rupees only.</u>										<u>₹ 385 = 00</u>

Examine here only additional or unusual expenses

Traveller's Signature S.M. Dhobale
 Checked by: _____
 Approved: _____
 PRINCIPAL. [Signature]

Amount Advance	
Less Amount spent as per T.A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff training etc</u> Shri <u>Phalke P.L.</u>		Voucher No. : C. B. F. : Date : <u>11/12/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp etc		
	paid registrat ⁿ fees to miss. P.L. Phalke	500.	50
	for attending Seminar at ranganpur.		
	TOTAL	500	50
Rupees (in words) <u>Five hundred only.</u>		received by Cash/Cheque	
 Principal	 Secretary	 Cashier/Accountant	 Receiver's Signature



64

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE- 412411

**STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019**

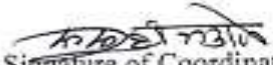
Receipt No. :07
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. phalke P.L.

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

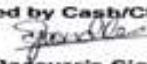
Signature of Principal 
B.J.Arts, Commerce & Science College
Ale, Tal. Junnar, Dist. Pune - 412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

6. MISS S.Y. MENDHEKAR

21

 Vishal Institute of Pharmaceutical Education & Research Vishal Junnar Seva Mandal's Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER Voucher No. : C. B. F. : Date : 12/02/2019	
Debit <u>Staff Training cost etc</u> Shri <u>Mendhekar S.Y.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Paise
	By Staff Training cost etc	360	00
	paid reg fees traveling to		
	Mendhekar S.Y. for attend cly		
	at Ale.		
TOTAL		360	00
Rupees (in words) <u>Three hundred sixty only</u>		received by Cash/Cheque  Receiver's Signature	
Principal 		Secretary  Cashier/Accountant 	

Shri Gajanan Maharaj Shikshan F. Sarak Mandal's

SHARADCHANDRA PAWAR COLLEGE OF PHARMACY

Approved by A.I.C.T.E. & Affiliated to Savitribai Phule Pune University
 Otur (Dumbarwadi), Tal: Junnar, Dist: Pune. Ph: 02132-265729/ 265730

MISCELLANEOUS RECEIPT

No.: 507 Date: 11/2/2019

This is to Certify that Mr./Miss./Mrs. Mendhekar Seema Yuraj
 the Sum of Rupees Three Hundred Only /-
 On account of SPCOP
 On Cash / Cheque No. drawn on

Rs. 300/-
 Subject to realisation of Cheque


 Receiving Clerks Signature


 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411



VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Mendhekar S.Y. Designation Asst. Professor Department Pharmacy

Date	Transport From	Depart Time	Transport to	Arrival Time	Train S.T./Tax fare		Postage & Ram/Te (Rail Reservation)		Conveyance		D.A. with/without Supporting		Total
					Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	
01/02/2019	Ale	10.00 am	Alephoda (Auto)	10.15 am	10								10/-
01/02/2019	Alephoda	10.15 am	Orten (Auto)	10.30 am	20								20/-
01/02/2019	Orten	5.00 pm	Alephoda	5.15 pm	20								20/-
01/02/2019	Alephoda	5.20 pm	Ale	5.30 pm	10								10/-
													60/-

Grant Total of Exp. (in words) Rs. Sixty only

Explain here only additional or unusual expenses	Traveller's Signature <u>[Signature]</u>	Amount Advance	
	Checked by:	Less Amount spent as per T.A. Bill	
	Approved:	Balance Payable to Institute Traveller	
	PRINCIPAL <u>[Signature]</u>	Balance Paid/Received by	



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. :
C. B. F. :
Date : 9/8/2019

Debit staff training exp ale
Shri mendhekar s.r.

Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp ale paid T.A. & D.A. to Registrar's fees to miss. mendhekar s.r. for attend seminars at sangamner	760	00
TOTAL		760	00

Rupees (in words) seven hundred sixty received by Cash/Cheque

Principal Secretary Cashier/Accountant Receiver's Signature

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1653 Date : 01/03/2019
Name Mendhekar Seema Y.
Address VIPER Class _____

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	500	00
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges Registration fees		
Rupees in words <u>Five hundred</u>	500	

Cashier



PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR SEWA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Miss Mendhekar S.Y. Designation Asst. Professor Department Pharmacognosy

Date	Transport From	Depart Time	Transport to	Arrival Time	Train S/T fare Rs. Ps.	Postage & Travel /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
01/03/2019	Bute/Ale (Auto)	9.30 am	Alephata (Auto)	9.40 am	10.00				10.00/-
01/03/2019	Alephata	9.50 am	Jangnera	11.00 am	70.00				70.00/-
01/03/2019	Jangnera	11.05 am	Amrutachi in college	11.20 am	50.00				50.00/-
01/03/2019	Amrutachi College	4.45 pm	Jangnera	5.00 pm	50.00				50.00/-
01/03/2019	Jangnera	5.15 pm	Alephata	6.00 pm	70.00				70.00/-
01/03/2019	Alephata	6.05 pm	Ale	6.10 pm	10.00				10.00/-
									<u>260.00/-</u>

Grant Total of Exp. (in words) Rs. Two hundred sixty only.

Explain here only additional or unusual expenses

Traveller's Signature [Signature]
 Checked by: [Signature]
 Approved: [Signature]
 PRINCIPAL [Signature]

Amount Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveller	Balance Paid/Received by



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

7. MISS P.L. PHALKE

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
 Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1654 Date: 01/03/2019
 Name Phalke Pallavi L.
 Address VIPER Class _____

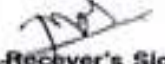
Particulars	Rs.	Ps.
1) Printing & Stationary Charges		
2) Miscellaneous Receipt	500 -	00
3) Xerox Charges		
4) Other Charges		
Registration fees		
Rupees in words <u>Five</u> <u>Hundred</u>	500	

[Signature]
Cashier



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

8. MR. M. B. HOLE

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER Voucher No. : C. B. F. : Date : 11/02/2019	
Debit <u>Staff Training exp etc</u> Shri <u>Hole m.b.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Paise
	By Staff Training exp etc	700	00
	Paid reg. fees & Travelling exp to		
	Mr. Hole m.b. for attend seminar		
	at Lonri clg.		
	TOTAL	700	00
Rupees (in words) <u>Seven hundred</u>		received by Cash/Cheque	
 Principal		 Cashier/Accountant	
Secretary		 Receiver's Signature	




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

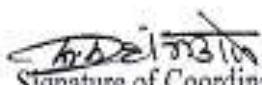
DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE- 412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019
Receipt No. :05
Date

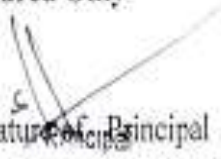
CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Mangesh Hole

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only


Signature of Coordinator


Signature of Principal
B.J.Arts, Commerce & Science College
Ale, Tal.Junnar, Dist.Pune, Pin-412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TALJUNNAR DIST-PUNE 412411

9. MISS. B.D. CHORDIYA

Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. :
C. B. F. :
Date : 17/09/2018

Debit Staff Training Exp
Shri Chordiya Bhakti

Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff Training exp	410	00
	paid to miss Chordiya Bhakti for attend seminar at Amrutvahini college of Pharmacy		
	TOTAL	410	00

Rupees (In words) four hundred Ten only received by Cash/Cheque

Principal [Signature] Secretary [Signature] Cashier/Accountant [Signature] Receiver's Signature [Signature]

Amrutvahini Sheti & Shikshan V' Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1614 Date : 07/09/2018
Name Ms. Chordiya Bhakti
Address _____ Class _____

Particulars	Rs.	Ps.
1) Printing & Stationary Charges		
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) Registration fees	150	
Rupees in words <u>one Hundred fifty</u>	150	1-

[Signature]
Cashier



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Miss. Chandra Prakash Designation Asst. Professor Department Pharmaceutics.

Date	Transport From	Depart Time	Transport to	Arrival Time	Trains, Ticket fare Rs. Ps.	Postage & Telegram Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
4 th Sept 2018	Alephata	9.00 am	Sangmeri	16.00 pm	701-				170=00
	Sangmeri	10.00	Arrival at College at Thane	10.15	201-				90=00
	Conveyance	4.30	Sangmeri	4.45	201-				260=00
	Sangmeri	4.45	Alephata	5.45	701-				

Grant Total of Exp. (in words) Rs. Two Hundred Sixty Rupees only

Examine here only additional or unusual expenses

Traveler's Signature [Signature]

Checked by : [Signature]

Approved : [Signature]
 PRINCIPAL

Amount Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveler	Balance Paid/Received by



[Signature]
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

10. DR. M.V. GADHAVE

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 08/01/20	
Debit		Staff Training exp. etc	
Shri		Dr. Gadhave M.V.	
Sr. No.	Particulars of Payment	Amount Rs.	
	By Staff Training exp etc	1950	
	paid 20/01/20 to Dr. Gadhave M.V., Dr. Phobale S.M. & Dr. Lohar G.D.		
	for attend Conference at modern city, Nigdi		
	TOTAL	1950	
Rupees (in words) one thousand nine hundred fifty		received by Cash/Ch	
Principal		Secretary	Cashier/Accountant
			Receiver's Sign




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411



76


MODERN COLLEGE OF PHARMACY (FOR LADIES)
 Bomadewadi, A/p. Moshi, Tal. Haveli, Dist. Pune - 412 105.
 Ph. No. : (020) 65108868

RECEIPT

Receipt No. : 343 Date : 26/10/18

Received with thanks from Smt. Dr. Gadhave. N. V.

the sum of Rupees 250/-

On account of National level seminar

BY CASH / CHECKUE / D.D. No. _____ Dated _____

drawn on _____ Branch _____

Rs. 250/-

Subject to encashment of Cheque

Accountant 




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Dr. Sagarbhai Designation M.V. Department Pharmacology

Date	Transport From	Depart Time	Transport to	Arrival Time	Taxis/Taxi fare Rs. Ps.	Postage & Travel Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. without out Supporting Rs. Ps.	Total Rs. Ps.
28/10/18	Ale	7:40	Moshe	9:00	Rs. 20	Rs. 120	Rs. 10	Rs. 55	Rs. 215
	Moshe	5:30	Ale	7:00	Rs. 120		Rs. 10	Rs. 10	Rs. 130
Grand Total of Exp. (in words) Rs. <u>Three Hundred Forty Five only.</u>									

Explain here only additional or unusual expenses

Traveler's Signature _____

Checked by: _____

Approved: _____

PRINCIPAL. Sy

Amount Advance	
Less Amount spent as per T.A. Bill	
Balance Payable to Institute/Traveler	
Balance Paid Received by	



Sy
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

11. DR.S. L. JADHAV,


MODERN COLLEGE OF PHARMACY (FOR LADIES)
 Borhadewadi, A/p, Moshi, Tal. Haveli, Dist. Pune - 412 105.
 Ph. No. : (020) 65108868

RECEIPT

Receipt No. : 342 Date : 26/10/18
 Received with thanks from Shri/Smt. Dr. Jadhav S.L.
 the sum of Rupees 250/-
 On account of National level seminar.
 BY CASH / CHEQUE / D.D. No. _____ Dated _____
 drawn on _____ Branch _____

Rs. 250/-
 Subject to encashment of Cheque

Accountant [Signature]




PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research
 Ale, Tal, Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. : _____

C. B. F. : _____

Date : 10/12/2018

Debit Staff training exp

Shri Kumbhar V.R.

Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp		
	paid regist ^r fees to Mr. V.R. Kumbhar		
	for attend AIP program at pune	200	
	TOTAL	200	

Rupees (in words) Two hundred received by Cash/Cheque

 Principal

 Secretary

 Cashier/Accountant

 Receiver's Signature

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE- 412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019

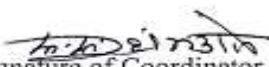
Receipt No. :06
Date

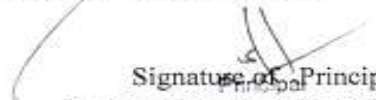
CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Kumbhar Umesh R.

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words **Two Hundred Only**

Signature of Coordinator 

Signature of Principal 
B.J.Arts,Commerce & Science College
Ale,Tal.Junnar,Dist.Pune.Pin-412411



80

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE- 412411
STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS
FEBRUARY 26 & 27, 2019

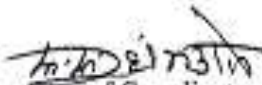
Receipt No. :06
Date

CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Kumbhar Umesh R.

Name of Institution VIPER, Ale

Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

Signature of Principal 
B.J.Arts.Commerce & Science College
Ale,Tal,Junnar,Dist.Pune.Pin-412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

13. MISS. S. S. KOLHE

DNYANESHWAR GRAMONNATI MANDAL'S
HON. B. J. ARTS, COMMERCE AND SCIENCE COLLEGE ALE, TAL. JUNNAR,
DIST. PUNE- 412411

**STATE LEVEL WORKSHOP ON INTELLECTUAL PROPERTY
RIGHTS**
FEBRUARY 26 & 27, 2019

Receipt No. :09
Date

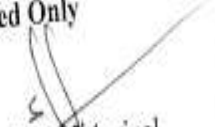
CASH RECEIPT

Name of the Participant : Mr/Mrs/Dr. Kolhe shilpa S.

Name of Institution VIPER, Ale

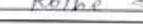
Amount of Cash Received (in figure) 200/- and in words Two Hundred Only

Signature of Coordinator 

Signature of Principal 
B.J.Arts, Commerce & Science College
Ale, Tal. Junnar, Dist. Pune. Pin-412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

	Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER
	Debit <u>staff training exp etc</u>	Shri <u>Kolhe S.S.</u>	Voucher No. : _____
			C. B. F. :
			Date : <u>22/02/2019</u>
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By <u>staff training exp etc</u> <u>paid to m/s Kolhe S.S. for attend</u> <u>seminar at chus.</u>	<u>800</u>	<u>00</u>
	TOTAL	<u>800</u>	<u>00</u>
Rupees (in words) <u>Eight hundred only</u>		received by Cash/Cheque	
Principal 	Secretary 	Cashier/Accountant 	Receiver's Signature 

Stt Jent Copy		Original
 SINGHAD INSTITUTE OF PHARMACEUTICAL SCIENCE 309/310 KUSGAON (BK), LONAVALA,, PUNE - 410401. Email : sipsaccounts@singhad.edu		
FEE RECEIPT		Date :
Receipt No : LIPS/1819/01148		: 10-1-2019
Received From : Shilpa Kolhe		
Description	Amount ₹	Description Amount ₹
Seminar & Workshop Fees-Others/18-19	500.00	
		
TOTAL		₹ 500.00
Mode Of Payment : CASH A/C		Name Of User : POONAM
Amount in Words : INR Five Hundred Only.		 Signature
Remark		




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

Shri Gajanan Maharaj Shikshan Mandal's
SHARADCHANDRA PAWAR
INSTITUTE OF PHARMACY
 Approved by A.I.C.T.E. & Affiliated to MSBTE, Mumbai
 Otur (Dumbarwadi), Tal: Junnar, Dist: Pune. Ph: 02132-265729/ 265730

MISCELLANEOUS RECEIPT

No.: **399** Date: 01 / 02 / 2019

This is to Certify that Mr./Miss./M/s. Kolhe Shilpa S.
 the Sum of Rupees Three hundred rupees only
 On account of _____
 On Cash / Cheque No. cash drawn on Conference.

Rs. 300/-
 Subject to realisation of Cheque

Dumbre
 Receiving Clerks Signature

[Signature]
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TALJUNNAR DIST-PUNE 410411



Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411. Vishal Junn. Seva Mandal's		DEBIT VOUCHER	
Debit <u>Staff Training exp etc.</u> Shri <u>Kumbhar sir.</u>		Voucher No. : C. B. F. : Date : <u>25/02/2019</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Paise
	Staff Training exp etc paid to Mr Kumbhar sir for attend seminar at pune.	1000	-00
TOTAL		1000	-00
Rupees (in words) <u>one thousand only.</u>		received by Cash/Cheque	
Principal	Secretary	 Cashier/Accountant	
		 Receiver's Signature	

State level seminar

RECEIVED with thanks of Prof. Kumbhar Umesh R.
the sum of Rupees Three hundred Rs only
by cheque / draft / cash, in full / part / advance
payment of our Bill No. _____ Dated 6/2/19 / A/c of _____

₹ 300/-

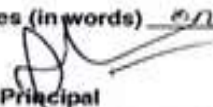
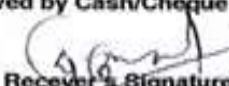
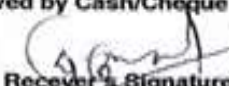
This receipt is valid subject to Realisation of cheque.

[Signature]
Signature



Vishal Institute of Pharmaceutical Education & Research, Ale | Faculty Empowerment Strategies

15. MR. S. T. TAMBE

 Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
		Voucher No. : C. B. F. : Date : 15/05/2019	
Debit <u>staff training exp</u>			
Shri <u>Tambe S.T.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By Staff training exp etc.	1450	00
	paid to Mr. Tambe S.T. for attend		
	Seminar at Sonai College.		
	TOTAL	1450	00
Rupees (in words) <u>one thousand four hundred Fifty</u>		received by Cash/Cheque	
Principal 		Secretary 	Cashier/Accountant 
		Receiver's Signature 	




PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

16. MR. R. U. GAWARE

Sr. No.		Particulars of Payment	Amount Rs. Ps.	
		By Staff training exp.	14	50
		paid to R.U. Gaware for attend		
		Seminar at SDnai College.		
		TOTAL	14	50

Debit staff training exp
Shri Gaware R.U.

Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER
Voucher No. :
C. B. F. :
Date : 15/05/2019

Rupees (in words) one thousand four hundred fifty. received by Cash/Cheque

Principal Secretary Cashier/Accountant Receiver's Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEV. MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name: Chavare P.V. Designation: Asst. Prof. Department: Pharmaceutics

Date	Transport From	Depart Time	Transport to	Arrival Time	Train & Fare		Postage & Tmt/Fa (Rail Reservation)		Conveyance		D.A. without Supporting		Total	
					Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.	Rs.	P.
17/11/19	Ale-phatga	7:00 AM	Sorai Ahmednagar	11:30	200	00	-	-	-	-	-	-	200	-
18/11/19	Sorai	5:00	Ale-phatga	8:30	200	00	-	-	-	-	-	-	200	-

Grand Total of Exp. (in words) Rs. five hundred only 400/-

Explain here only additional or unusual expenses	Traveler's Signature: <u>P.V.</u>	Amount Advance	
	Checked by:	Less Amount spent as per T.A. Bill	
	Approved:	Balance Payable to Institute/Traveler	
	PRINCIPAL	Balance Paid/Received by	



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

17. DR D. D. GAIKWAD



Progressive Education Society's
MODERN COLLEGE OF PHARMACY (FOR LADIES)
Borhadewadi, A/p. Moshi, tal. Haveli, Dist. Pune - 412 105.
Ph. No. : (020) 65108668

**RECEIPT**

Receipt No. : 341

Date : 26/10/18

Received with thanks from Shri/Smt. Dr. Gaikwadthe sum of Rupees 250/-On account of National level seminar

BY CASH / CHEQUE / D.D. No. _____ Dated _____

drawn on _____ Branch _____

Rs. 250/-

Subject to encashment of Cheque

Accountant



PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 418411

VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
Ale (412411) Tal. Junnar, Dist. Pune.

TRAVELLING EXPENSE BILL

Name Dr. Kumbhar Umesh R. Designation Asst. Prof. Department Pharmacy

Date	Transport From	Depart Time	Transport To	Arrival Time	Train S.T./Taxi fare		Postage & Tiffin / Rail Reservation		Conveyance		D.A. without Supporting		Total	
					Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.
23/11/19	ALE	6.30 AM	SNR Pune	9.00 AM	150.00	-	-	-	-	-	120.00	-	270.00	
-/-	SNR Pune	9.30 AM	Balewadi	10.35 AM	-	-	-	-	40.00	-	-	-	40.00	
-/-	Balewadi	6.30 PM	SNR Pune	8.00 PM	-	-	-	-	40.00	-	-	-	40.00	
-/-	SNR Pune	8.30 PM	ALE	11.00 PM	150.00	-	-	-	-	-	-	-	150.00	
24/11/19	ALE	6.30 AM	SNR Pune	9.15 AM	150.00	-	-	-	-	-	120.00	-	270.00	
-/-	SNR Pune	9.30 AM	Balewadi	10.45 AM	-	-	-	-	40.00	-	-	-	40.00	
-/-	Balewadi	7.00 PM	SNR Pune	8.30 PM	-	-	-	-	40.00	-	-	-	40.00	
-/-	SNR Pune	9.00 PM	ALE	11.45 PM	150.00	-	-	-	-	-	-	-	150.00	
					600.00	-	-	-	160.00	-	240.00	-	1000.00	

Grant Total of Exp. (in words) Rs. One Thousand only.

Explain here only additional or unusual expenses

Traveller's Signature Dr. Kumbhar
23/11/19

Checked by:

Approved: Dr. Kumbhar
PRINCIPAL

Amount Advance

Less Amount spent as per T.A. Bill

Balance Payable to Institute/Traveler

Balance Paid/Received by



Dr. Kumbhar
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research
 Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Debit Staff Training exp at

Shri Sonawane Sir

Voucher No. :

C. B. F. :

Date : 05/02/2019

Sr. No.	Particulars of Payment	Amount	
		Rs.	Ps.
	By Staff Training exp.	720	
	paid reg. fees of 700 to Mr. Sonawane		
	for attend seminar at Shirur.		
	TOTAL	720	00

Rupees (in words) Seven Hundred Twenty.

received by Cash/Cheque

Principal

Secretary

Cashier/Accountant

Receiver's Signature

SAVITRIBAI PHULE PUNE UNIVERSITY SPONSORED SEMINAR
ON 1st AND 2nd February 2019
Organized By :
SCSSS's SITABAI THITE COLLEGE OF PHARMACY,
Shirur, Pune - 412210

RECEIPT No. : 154 Date : 1st February 2019

Received with thanks from Dr./Mr./Mrs./Ms. Abhijad Ashok Sonawane

Rupees (in words) Two Hundred only

by cash as SEMINAR registration fees.

Rs. 200/-


Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411



VISHAL JUNNAR SEVA MANDAL'S
**VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION & RESEARCH**

Dr. S. L. Jadhav
Principal

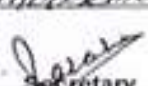
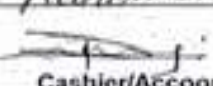
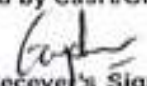
Ale, Tal. Junnar, Dist. Pune-412411 | Contact No. : 9892376014 | E-mail : vjism.principal@gmail.com | Website: www.viperaie.com

P.C.I. Inst. Code : PCI-2620 | D.T.E. Inst. Code : 6361 | University I.D. No. : CPHP012670

2017-18

**Number of teachers provided with financial
support = 14**

1. DR. G. S. DHOBAL (DR. G. A. LOGHE)

Vishal Junnar Seva Mandal's		DEBIT VOUCHER	
Vishal Institute of Pharmaceutical Education & Research		Voucher No. :	
Ale, Tal. Junnar, Dist. Pune-412411.		C. B. F. :	
Debit <u>STAFF Training Exp A/c</u>		Date : <u>19/01/2018</u>	
Shri <u>Loghe G. A.</u>			
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	B7 STAFF Training Exp A/c	1120	= 00
	paid T.A. & registration fee		
	for attend seminar at Chandelwad		
	College Nashik.		
	TOTAL	1120	= 00
Rupees (in words) <u>one thousand one hundred twenty only</u> received by Cash/Cheque			
			
Principal	Secretary	Cashier/Accountant	Receiver's Signature




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411


S.N.J.B. Ashram's
SHRIMAN SURESHDADA JAIN
COLLEGE OF PHARMACY
(DEGREE COLLEGE)
Neminagar, Chandwad - 423101 Dist. Nashik
Ph.: (02556) 252529 / 253179

Rec. No.: 5069 Date: 17/1/2018
Name: Labhe Gayatri D
Year: I ☐ II ☐ III ☐ IV ☐

Sr. No.	Particulars	Amount Rs.
1	Prospectus & Admission Form Fees	
2	Tuition Fees	
3	Development Fees	
4	Improvement Fees	
5	Exam Fees	
6	Common Breakage	
7	Uni. Photocopy Fees	
8	Eligibility Fees	
9	University Fees	
10	St. Activity Fee Conference	200/-
11	Other Accommodation	100
in Words Rs. _____		300

Cash / D.D. / Cheque
Cheque will be credited on realisation


Accountant




PRINCIPAL

VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TALJUNNAR DIST-PUNE 410411



V JS M's Vishal Institute Of Pharmaceutical Education And Research Alel Faculty Empowerment Strategies

Vishal Institute of Pharmaceutical Education & Research
ALE, Tal. Junnar, Dist. Pune - 412411.
TRAVELLING EXPENSE BILL

Name LOBHE SATISH APPARAO Designation Asst Prof Department Pharmaceutical Chemistry

Date	Transport From	Depart Time	Transport to	Arrival Time	Train's / Taxi fare Rs. Ps.	Postage & Jani/le /Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D-R with/without Supporting Rs. Ps.	Total Rs. P
7/11/18	Alephata	6.15 am	SNB BCOF Chandwad	11.30 am	210 00	-	-	Dinner 100 00	310 0
8/11/18	SNB BCOF Chandwad	4.30 pm	Alephata	9.00 pm	210 00	-	-	Dinner 100 00	310 0
Total									620/-

Grant Total of Exp. (in words) Rs. Six Hundred Twenty Rs only

Explain here only additional or unusual expenses

Traveler's Signature _____
Checked by: _____
Approved - _____
PRINCIPAL.

Amount Advance	Rs. Ps.
Less Amount spent as per T. A. Bill	
Balance Payable to Institute/Traveler	
Balance Paid/Received by	




PRINCIPAL

VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Junnar Seva Mandal's
Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

Debit By Staff training exp Ale
Shri Lobhe G-A.

DEBIT VOUCHER

Voucher No. :
C. B. F. :
Date : 18/05/2018

Sr. No.	Particulars of Payment	Amount	
		Rs.	P.
	By staff training exp Ale	500	00
	paid to miss. Lobhe G-A. for attend one week induction program at Johan inst of pharma7 palghar		
	TOTAL	500	00

Rupees (in words) Five Hundred only

Principal [Signature] Secretary [Signature] Cashier/Accountant [Signature] received by Cash/Cheque [Signature]
Receiver's Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

ST. JOHN INSTITUTE OF PHARMACY AND RESEARCH
 ALDEY EDUCATION TRUST
 St. John Technical Campus, Vevoor, Minor Road, Palghar (East), Dist. Palghar - 401404.
 Tel.: (02525) 256486 / 256392 Fax: (02525) 256834 Email: office@sjpr.in Website: www.sjpr.in

RECEIPT

Person's Name: Gayatri Lohbe No.: M-388
 Date: 7/5/2018

PARTICULARS	AMOUNT
Others	
Narration: AICTE-ISTE Membership	3540.00
Total	3540.00

Rupees: Three Thousand Five Hundred Forty Only
 Cash/Cheque*/Pay Order/D.D. No.: *Cheque Subject To Realization
 Date: 7/5/2018
 Branch:



For SJPR:

One Week Induction Programme on
 'A comprehensive Induction on Best
 Practices for Effective Teaching Learning Process'

at St John Institute of Pharmacy & Research, Palghar.
 7th May to 12th May 2018

[Signature]
 VISPR, ALE

ISTE membership = 3040
 Registration fee = 500
Total = 3540

[Signature]
 Registration fee
 500

2. MR. S. G. PATEL

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)

19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

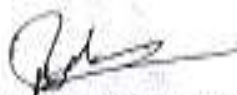
No.: **78**

Received with thanks from Dr./Mr./Mrs./Ms. **Patel S.G**

Rupees **six hundred**

By cash/DD/Cheque No. _____ towards the registration fee.

₹ **600/-**


Co-ordinator/Secretary


PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TALJUNNAR DIST-PUNE 412411



3. MISS A. S. BANSODE

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandaf's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

No.: **77**

Received with thanks from Dr./Mr./Ms./Mrs. Bansode A.S.

Rupees Six hundred

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 600/-


Co-ordinator/Secretary




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

4. DR. S.M. DHOBALE

Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff training exp</u>		Voucher No. :	
Shri <u>Dr. Dhobale S.M.</u>		C. B. F. :	
		Date : <u>09/03/2018</u>	
Sr. No.	Particulars of Payment	Amount Rs.	P.
	<u>By staff training exp Ale</u>	<u>600</u>	<u>00</u>
	<u>paid for registration fee to DR</u>		
	<u>Dhobale S.M. for work shop at Ale</u>		
	TOTAL	<u>600</u>	<u>00</u>
Rupees (in words) <u>six Hundred only</u>		received by Cash/Cheque	
<u>[Signature]</u> Principal		<u>[Signature]</u> Receiver's Signature	
<u>[Signature]</u> Secretary		<u>[Signature]</u> Cashier/Accountant	

**Two Day State Level Conference on
RECENT APPROACHES, ENVIRONMENTAL PROTECTION &
SUSTAINABLE DEVELOPMENT (R&SD 2018)**

19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dayaneshwar Gramannati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522)

No.: **70** Date: - 19/01/2018

Received with thanks from Dr./Mr./Ms./Mrs. Dhobale Shankar G.

Rupees Twelve hundred.

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 1200/-

[Signature]
Co-ordinator/Secretary



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TALJUNNAR DIST-PUNE 412411




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 410411



[Signature]
PRINCIPAL

VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TAL-JUNNAR DIST-PUNE 412411

Vishal Institute of Pharmaceutical Education & Research
ALE, Tal. Junnar, Dist. Pune - 412411.
TRAVELLING EXPENSE BILL

Name Dr. S.M. Dubale. Designation Asst. Prof. Department Pharmacology

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Taxi fare		Postage & Tmt/Te /Rail Reservation		Conveyance		D. A. with/without Supporting		Total
					Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	
22/11/17	Alephata	5.30 am	Kalyan	8.30 am	150	40	-	-	-	-	120	40	425
	from Back page		superdindie		155	40					140	40	420
23/11/17	Kalyan	8.00 pm	Alephata	11.30	170	40							
	from Back page		superdindie		190	40							Total = 845

Grant Total of Exp. (in words) Rs Eight hundred forty five Rupees only.

Explain here only additional or unusual expenses

Traveller's Signature *[Signature]*

Checked by:

Approved -

PRINCIPAL

Rs.	P.
Amount Advance	
Less Amount spent as per T. A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	

5. MR. S. S. KADAM

Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff Training exp</u>		Voucher No. :	
Shri <u>MR. Kadam S.S.</u>		C. B. F. :	
		Date : <u>8/2/2018</u>	
Sr. No.	Particulars of Payment	Amount Rs.	Ps.
	By staff training exp	256	00
	Paid T.A. and registration fee	300	
	To Mr Kadam S.S for Attend seminar		
	At AmRutvikini collage sangamner		
		556	
	TOTAL	556	00
Rupees (in words) <u>Five Hundred Fifty six only</u>		Received by Cash/Cheque	
Principal <u>[Signature]</u>		Receiver's Signature <u>[Signature]</u>	
Secretary <u>[Signature]</u>		Cashier/Accountant <u>[Signature]</u>	



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TAL-JUNNAR DIST-PUNE 412411

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
 Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1824

Date : 31 / 1 / 2018

Name Kadam S.S

Address Vishal institute, Class staff
ale

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	300/-	
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) peg fees.		
Rupees in words <u>three</u> <u>hundred rupees only</u>	300 = 00	

ML
Cashier



[Signature]
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
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 ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name: Mr. Kadam Sachin S. Designation: Asst. Prof. Department: Pharmaceutical Chemistry

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Tax fare Rs. Ps.	Postage & Tam/Ta (Rail Reservation) Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
31/04/19	Ale Phata	7.00 a.m.	Sangamner	9.00 a.m.	58.00		70.00	80.00	128.00
11/05/19	Sangamner	5.30 p.m.	Ale Phata	7.30 p.m.	58.00		70.00		128.00
					116.00		140.00	80.00	336.00

Grand Total of Exp. (in words) Rs. Three hundred & thirty six only
fifty

Explain here only additional or unusual expenses

Traveller's Signature: [Signature]
 Checked by: [Signature]
 Approved: [Signature]
PRINCIPAL-

Amount Advance	
Less Amount spent as per T.A. Bill	
Balance Payable to Institute/Traveller	
Balance Paid/Received by	



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

6. MISS S. Y. MENDHEKAR

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

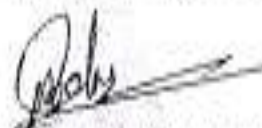
No.: **80**

Received with thanks from Dr./Mr./Mrs./Ms. Mendhekar S.Y.

Rupees Six hundred

By cash/DD/Cheque No. _____ towards the registration fee.


600/-


 Co-ordinator/Secretary




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

7. MR. D. B. DESHMUKH

COLLEGE OF PHARMACY, (B. PHARMA) AHMEDNAGAR
Misc. Receipt Book

No. 2194 Date: 17/11/2017
 Name Shri / Miss Prof. Deshmukh D. B.
 Roll No. Class
 Received the sum of Rs. 200/- (In Words) Rs.
 on account of as under .

Sr.No	Particulars	Amount	
		Rs.	Ps.
1)	Fine / Breakage Charges / Lib.		
2)	Prospects / Sale of form		
3)	Bonafide / L.C / Transcript		
4)	Verification / Rev.		
5)	Other <u>Registration Fee</u>	<u>200</u>	<u>00</u>
Total Rs.		<u>200</u>	<u>00</u>


CASHIER




 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEVA MANDAL'S

Vishal Institute of Pharmaceutical Education & Research

ALE, Tal. Junnar, Dist. Pune - 412411.

TRAVELLING EXPENSE BILLName: Mrs. Peshmuth D. B. Designation: Asst. Professor Department: Pharmacology

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Taxi fare		Postage & Tami/Te /Rail Reservation		Conveyance		D. A. with/without Supporting		Total	
					Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.	Rs.	Ps.
17/11/17	Alephata	8:00 am	Pharmacy college A' Nagar	10:50 am	115	00	-	-	-	-	-	-	115	-
17/11/17	Pharmacy college A' Nagar	4:15 pm	Alephata	6:00 pm	115	00	-	-	-	-	-	-	115	-
														230

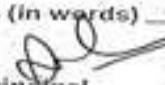
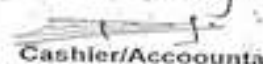
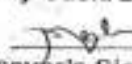
Grant Total of Exp. (in words) Rs. Two hundred thirty Rs / -

Explain here only additional or unusual expenses		Rs.	Ps.
Traveller's Signature: <u>[Signature]</u>			
Checked by:			
Approved -			
PRINCIPAL -			
Amount Advance			
Less Amount spent as per T. A. Bill			
Balance Payable to Institute/Traveller			
Balance Paid/Received by			



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

8. MR. M. B. HOLE

Vishal Junnar Seva Mandal's Vishal Institute of Pharmaceutical Education & Research Ale, Tal. Junnar, Dist. Pune-412411.		DEBIT VOUCHER	
Debit <u>Staff salary exp</u>		Voucher No. :	
Shri <u>Hole Mangesh Balasahab</u>		C. B. F. :	
		Date : <u>20/2/2015</u>	
Sr. No.	Particulars of Payment	Amount Rs. Ps.	
1	BY Registration fee. Exp Ale	300	00
	<u>paid Registration Fee to Mr.</u>		
	<u>Hole M.B.</u>		
	TOTAL	300	00
Rupees (in words) <u>Three hundred only</u>		received by Cash/Cheque	
 Principal	 Secretary	 Cashier/Accountant	 Receiver's Signature




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
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ALE TALJUNNAR DIST-PUNE 412411

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE OF PHARMACY
 Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1829

Date : 31 / 1 / 2018

Name Hole Mangesh Balasaheb

Address Vishal Institute Class Staff
etc.

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	300/-	
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) Registration fees		
Rupees in words <u>three</u>	300 = 00	
... <u>hundred</u> ... rupees only		

MR.
Cashier



[Signature]
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 410411

9. DR. M. V. GADHAVE

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)



19th and 20th Jan. 2018

Organized by

Department of Chemistry

Dnyaneshwar Gramonnati Mandal's

Hon. Balasaheb Jadhav Arts, Commerce and Science College,

Ale, Tal: Junnar, Dist: Pune (412411)



No.: 75

Tel: 02132(263078, 262522)

Date: - 19/01/2018

Received with thanks from Dr./Mr./Mrs./Ms. Gadhav M.V.

Rupees Six hundred

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 600/-

[Signature]
Co-ordinator/Secretary



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

10. DR. S. L. JADHAV

Two Days State Level Conference on
RECE. APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

No.: **74**

Received with thanks from Dr./Mr./Ms./Mrs. Jadhav S.L.

Rupees six hundred

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 600/-

[Signature]
Co-ordinator/Secretary



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

11. MR. U.R. KUMBHAR

Vishal Junnar Seva Mandal's
Vishal Institute of Pharmaceutical Education & Research
Ale, Tal. Junnar, Dist. Pune-412411.

DEBIT VOUCHER

Voucher No. :
C. B. F. :
Date : 20/2/2018

Debit Staff Training Exp
Shri Kumbhar U.R.

Sr. No.	Particulars of Payment	Amount	
		Rs.	Ps.
	By Staff Training Exp Ale	610	00
	Paid T.D. and Registration fee		
	To Kumbhar U.R. for Attend Seminar		
	At Sitabai Thite College Shirur		
	TOTAL	610	00

Rupees (in words) Six hundred ten only/- received by Cash/Cheque

Principal [Signature] Secretary [Signature] Cashier/Accountant [Signature] Receiver's Signature [Signature]

SAVITRIBAI PHULE PUNE UNIVERSITY SPONSORED SEMINAR
17th Feb 2018

Organized by:
SITABAI THITE COLLEGE OF PHARMACY,
Shirur, Pune-412210

RECEIPT No. 36 Date: 17th Feb 2018

Received with thanks from Dr./Mr./Ms. Kumbhar
Umesh D.

Rupees (In words) six hundred only/-
by cash as SEMINAR registration fees.

Rs. 200 [Signature]
Signature



[Signature]
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

VISHAL JUNNAR JEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Prof. Kumbhar Umesh R. Designation Asst. Prof. Department Pharmacy (Pharmaceutics)

Date	Transport From	Depart Time	Transport to	Arrival Time	Transit / Fare Rs.	Postage & Travel / Rail Reservation Rs.	Conveyance Rs.	D.A. without Supporting Rs.	Total Rs.
17/11/18	Ale.	8:30 AM	Shirur.	10:30 AM	80 = 80	—	25 = 25	—	105 = 105
17/11/18	Shirur.	5:00 PM	Ale.	8:30 PM	80 = 80	—	25 = 25	—	105 = 105
									210 = 210

Grant Total of Exp. (in words) Rs. Two hundred Ten only

Examine here only additional or unusual expenses

Traveller's Signature [Signature] Date 17/11/18

Checked by: [Signature] Date 17/11/18

Approved: [Signature]

PRINCIPAL

Amount/Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveller	Balance Paid/Received by



[Signature]
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 ALE TAL-JUNNAR DIST-PUNE 412411

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

No.: **81**

Received with thanks from Dr./Mr./Mrs./Ms. **Kumbhar V.R.**

Rupees **six hundred**

By cash/DD/Cheque No. _____ towards the registration fee.

₹ **600/-**

Belar
Co-ordinator/Secretary



Shilp
PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

12. MISS. S. S. KOLHE

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

No.: **79**

Received with thanks from Dr./Mr./Mrs./Ms. Kolhe S.S.

Rupees six hundred

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 600/-


Co-ordinator/Secretary




PRINCIPAL
VISHAL INSTITUTE OF PHARMACEUTICAL
EDUCATION AND RESEARCH
ALE TAL-JUNNAR DIST-PUNE 412411

13. MR. A. A. SONAWANE

Amrutvahini Sheti & Shikshan Vikas Sanstha's
AMRUTVAHINI COLLEGE C. PHARMACY
 Amrutnagar, Tal. Sangamner

RECEIPT BOOK

No. 1825

Date : 31 / 11 / 2018

Name Abhijeet A. SonawaneAddress Vishal institute. Class Staff
ALE

Particulars	Rs.	Ps.
1) Printing & Stationary Charges	300/-	
2) Miscellaneous Receipt		
3) Xerox Charges		
4) Other Charges		
5) Registration fees.		
Rupees in words <u>three</u> <u>hundred...rupees only</u>	300 = 00	

m.
Cashier



Sukh
 PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
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 ALE TAL-JUNNAR DIST-PUNE 410411

VISHAL JUNNAR SEVA MANDAL'S
VISHAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH
 Ale (412411) Tal. Junnar, Dist. Pune.
TRAVELLING EXPENSE BILL

Name Mr. A. A. Sonawale Designation Asst. Prof. Department Pharmaceutical Chemistry

Date	Transport From	Depart Time	Transport to	Arrival Time	Train/S.T./Tax fare Rs. Ps.	Postage & Telegram Rail Reservation Rs. Ps.	Conveyance Rs. Ps.	D.A. with/without Supporting Rs. Ps.	Total Rs. Ps.
01/04/18	Alephata	7:00am	Sangamner	9:00am	58.00		70.00	80.00	128.00
	Sangamner	5:00pm	Alephata	7:00pm	58.00		70.00		128.00
					115.00		140.00	80.00	256.00

Grant Total of Exp. (in words) Rs. Three Hundred Fifty Six

Examine here only additional or unusual expenses

Traveller's Signature [Signature]
 Checked by: [Signature]
 Approved: [Signature]
 PRINCIPAL

Amount Advance	Less Amount spent as per T.A. Bill	Balance Payable to Institute/Traveller	Balance Paid/Received by



[Signature]
PRINCIPAL
 VISHAL INSTITUTE OF PHARMACEUTICAL
 EDUCATION AND RESEARCH
 ALE TAL-JUNNAR DIST-PUNE 412411

14. DR. S.K BANERJEE

Two Days State Level Conference on
RECENT APPROACHES IN ENVIRONMENTAL PROTECTION AND
SUSTAINABLE DEVELOPMENT (RAEPSD-2018)
19th and 20th Jan. 2018
Organized by
Department of Chemistry
Dnyaneshwar Gramonnati Mandal's
Hon. Balasaheb Jadhav Arts, Commerce and Science College,
Ale, Tal: Junnar, Dist: Pune (412411)
Tel: 02132(263078, 262522) Date: - 19/01/2018

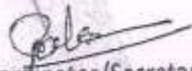
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Received with thanks from Dr./Mr./Mrs./Ms. S.K. Banerjee.

Rupees Six hundred

By cash/DD/Cheque No. _____ towards the registration fee.

₹ 600/-


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Dr. S. L. Jadhav
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