## National Health Systems Resource Centre

## HONORARIUM VOUCHER

| Name       |           | Designation |             | Date |              |         |
|------------|-----------|-------------|-------------|------|--------------|---------|
|            |           | 2           |             |      |              |         |
| SI No.     | Date      | Description |             |      | Amount (Rs.) |         |
|            |           |             |             |      |              |         |
|            |           |             |             |      |              |         |
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|            | 44.       |             |             |      |              |         |
|            |           | Total:-     |             |      |              |         |
| <b>,</b> _ |           |             | 3           |      |              | *       |
| (Rupees    | in words) |             |             |      | 9            |         |
|            |           |             |             | 3    |              |         |
|            |           |             |             |      | Signature of | Claimar |
|            |           |             | Verified by | '•   |              |         |

Approved by