No. CIS-Admin-05



Islamabad Node administration@comsats.net.pk

PROFORMA FOR CLAIMING REFRESHMENT CHARGES Please attach original receipts/cash memo's verified by officer Incharge

Names of Officials:				
Designation:Departments				
Nature: 1.Tea	2. Breakfast:		_3. Luncl	n:
4. Dinner:	5. Soft Drink:		_6. Any other Items:	
Name of Client Worked for:				
Description of Work:				
Amount Claimed:				
Date of Work Done: No. of Hours worked:				
Time (Work Started) (Work Ended)				
			Yes	No
Have you claimed extra du	ty allowance for	this date		
Have you claimed over time for the day				
			_	Signature of Employee

Chief Executive Officer CIS

Certified by: (Officer Incharge)