



# **UTILIZATION CERTIFICATE**

## **For Honorarium of Personnel of Toilets Maintenance**

**Date:**

Mandal :

Name of the School :

HM Name :

<b>Sl No</b>	<b>Name of the Person</b>	<b>For the Month of</b>	<b>Cheque No</b>	<b>Amount</b>	<b>Signature</b>
	<b>Total</b>				

**Paid by:**

**Signature**

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_