**Acknowledgement Receipt**

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| --- |
| **Beneficiary Information** |
| **1. Name** |  |
| **2. Nationality** |  |
| **3. Affiliation** |  |
| **4. Position** | □ Professor□ Researcher | □ Postdoc□ Student |
| **Details** |
| **5. Conference Name** |  |
| **6. Dates of Attendance** |  |
| **7. Amount** | **Item** | **Currency** | **Amount** |
| Flight |  |  |
| Accommodation |  |  |
| Honorarium |  |  |

**I acknowledge receipt of funds from APCTP and certify that the above information given are true and correct. I also affirm that I have not made any claims regarding the expenses of the same item to any other institutes.**

Printed Name & Signature

Date Signed