



University Of Kashmir, Srinagar

No: _____

Dated: _____

(To be filled by the candidate and submitted to the office of the Department/Centre/Section on or before 22nd of each month and the same completed in all respects should reach to Dean Research (Accounts) latest by 25th of each month.

BILL FORM FOR

JRF's/SRF's/RA's/Field & Survey Associates/Field Investigators/Field Attendants/Other Staff, working in time bound sponsored research projects/schemes/consultancy etc.

1. Name of the claimant _____
2. Designation of claimant: _____
3. Name of the project /programme etc _____
4. Department / Centre/ Campus: _____
5. Month /period of claim: _____
6. Order No. Date of engagement (copy enclosed): _____
7. Emolument /month _____ Total amount claimed _____
8. (16) Digit A/C. No. _____ IFSC Code _____
9. Bank/ Branch details: _____
10. Email ID: _____ Mobile No. _____
11. Certified that the concerned is not availing University lodging facility in case HRA is drawn: _____
12. PAN No. _____

Pre-Receipt

Affix Revenue Stamp Rs 2/- Signature of candidate Supervisor/Principal Investigator/Mentor/Coordinator

I solemnly declare that the scholar worked in accordance with rules and regulations governing the academic programme /scheme/project during the period of claim. I also declare that the scholar has put in required attendance during the period.

Supervisor/Principal Investigator/Mentor/Coordinator

Remarks/Verification/Clearance from Accounts Section

Passed for Rs. _____ in words _____

Dealing Asstt.

Head Asstt. /SO

A.R/D.R. Accounts

Dean Research