

KAPILA SCHEME

STATEMENT OF ACTUAL EXPENDITURE FOR CLAIMING THE REIMBURSEMENT FOR THE FILED PATENT APPLICATION

| | |
|-----------------------------------|--|
| Permanent ID of Institute | |
| Name and address of the Institute | |
| Name of Head of Institute | |
| Mobile No. | |
| Landline No. | |
| Email id : | |
| Name of Inventors: | |

| EXPENDITURE DETAILS FOR FILED PATENT APPLICATION | | |
|--|---------------------------------------|-----------------|
| S. No. | Expenditure Head | Amount (in Rs.) |
| 1. | Patent application filling fee | |
| 2. | Examination fee | |
| Total | | Rs. |
| (In words) Rs. | | |

(1) _____
Signature of Inventor
Name :
Designation :
Mobile No.

(2) _____
(Signature of Head of Institution)
Name :
Designation :
Mobile No.

(3) -----
**Signature (with Seal of the Finance Officer/
Govt. Auditor/Registrar)**
(In case of Govt./Govt. Aided Institute)

Date: