**KAPILA SCHEME**

**STATEMENT OF ACTUAL EXPENDITURE**

**FOR CLAIMING THE REIMBURSEMENT FOR THE FILED PATENT APPLICATION**

**(for Government/Government Aided Institute)**

|  |  |
| --- | --- |
| Permanent ID of Institute |  |
| AISHE Code of Institute |  |
| Name of the Institute |  |
| Address of the Institute |  |
| Name of Head of Institute |  |
| Mobile No.  |  |
| Landline No. |  |
| Email id. |  |

**EXPENDITURE DETAILS FOR FILED PATENT APPLICATION**

| **S. No.** | **Patent Application No.****(As per Indian Patent Office Record)** | **Patent Application** **Filing Fee** | **Patent Application** **Examination Fee** | **Amount****(in Rs.)** |
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| **Total** |  |
| **(In words) Rs.** |

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| 1 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signature of Head of Institute with Seal) Name :Designation : | 2 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signature Finance Officer with Seal)Name : Designation : |
|  | Date: |  |  |