**KAPILA SCHEME**

**STATEMENT OF ACTUAL EXPENDITURE**

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

**(for Private Institute)**

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| --- | --- |
| Permanent ID of Institute |  |
| AISHE Code of Institute |  |
| Name and 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 of Charteted Accountant with Seal)Name :Registraton No. : |
|  | **Date:** |  |  |