



INDIAN NATIONAL SCIENCE ACADEMY
Bahadur Shah Zafar Marg, New Delhi 110002

Claim Bill

Financial Year _____

(To be submitted in **DUPLICATE**)

1. Name of the programme: **INSA HONORARY SCIENTIST**
2. INSA Sanction / Renewal No. _____ dated _____
3. a) Name of the Honorary Scientist and address
b) Date of Joining:
4. Name in whose favor grant is to be released
5. Research Project:
 - a) Title of Research Project
 - b) Activity Report / Progress Report of Previous Year

Submitted / Not Submitted / N.A.
(Please tick mark)

6. **Details of Grant:**

To be claimed from the Academy:

Particulars	Contingency	Total
a) Amount sanctioned (for the period)		
b) Unspent Balance, if any of the previous year (period)		
c) Net Amount Claimed		

7. Bill: 1st / 2nd installment / Both
8. Certified that the amount claimed in this bill will be utilized for the purpose for which it has been Sanctioned and audited statement of expenditure will be furnished as soon as possible.

**Countersignature of the
Head of Institution with
Designation and Seal**

(Signature of Hon. Scientist)

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