ANNEXURE III

NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI

PROPOSAL FOR DISTRIBUTION OF INSTITUTIONAL CONSULTANCY / RETAINER CONSULTANCY EARNINGS

DISTRIBUTION PROPOSAL: ☐ First ☐ Second ☐ Third ☐ Final

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<tr>
<th>Approval No:</th>
<th>Date of Approval:</th>
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Name of the Client

Total Consultancy Fee [A] Rs.: ______________________

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<tr>
<th>Sl. No.</th>
<th>Amount (A)</th>
<th>Receipt No.</th>
<th>Date</th>
<th>Pay-in-Slip Sl.No.</th>
<th>Service Tax (S) [A * (12.36/112.36)]</th>
<th>Balance Amount as per pay-in-slip (A-S) x 0.85</th>
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1. TOTAL BALANCE AMOUNT AS PER PAY-IN-SLIP Rs. ______________

2. EXPENDITURE
   a) Department/Centre:-
      - Equipment Utilisation Cost.
      - Stores Consumed
      - Others (Specify)
      
      Sub Total of (a) ______________________
   b) Outside:-
      - Bought out Stores
      - Charges for External Facilities
      - Salaries/Wages
      - Sub contracting
      - Others (Specify)
      
      Sub Total of (b) ______________________

3. TOTAL EXPENDITURE [(a+b) of Sl.No.2]: ‘E’ ________________________ Rs. ______________

4. BALANCE (Sl.No.1- Sl.No. 3) ________________________ Rs. ______________

5. INSTITUTE’S SHARE (8 % of Sl.No. 4) ________________________ Rs. ______________

6. IC&SR’S SHARE (2% of Sl.No.4) ________________________ Rs. ______________

7. DEPARTMENTAL SHARE (10% of Sl.No. 4) ________________________ Rs. ______________

8. CENTRAL ADMINISTRATION (5% of Sl. No. 4) ________________________ Rs. ______________

9. AMOUNT AVAILABLE FOR DISTRIBUTION Rs. ______________

   ▪ Certified that i) all expenses incurred upto date are shown here
   ▪ ii) no pending bills are to be paid for

Principal Consultant/Project Leader

Head of the Dept./Centre

To: - The Dean IC & SR, NITT
Referred to Project Accounts Section for verification of all expenditure mentioned on prepage and arrange for payment

DEAN, IC&SR

To

The DR (Accounts)
N.I.T Tiruchirappalli

Payment of Rs. .......................................................... as remuneration to the staff members as indicated in this distribution proposal has been approved by the Director.

For Central Administration: Rs. .........................

DR (Finance & Accounts)

To

The Dean ICSR
N.I.T Tiruchirappalli
NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI

Distribution of Honorarium to Staff

Enclosure to Distribution proposal ref. ICSR/…………………………………………
Quote the relevant ICSR approval No.& date(s))

Department:

Laboratory:

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<tr>
<th>Sl.</th>
<th>Name and Designation</th>
<th>Employee No and Pay Bill No.</th>
<th>Amount of Honorarium</th>
<th>Income Tax*</th>
<th>Net Amount*</th>
<th>Acquittance by payee / through Bank</th>
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Signature of the Consultant/Project leader

NOTE: *columns 5 & 6 will be filled in by the Accounts Section.