



GL BAJAJ GROUP OF INSTITUTIONS

MATHURA (UTTAR PRADESH)

CLAIM FORM FOR REMUNERATION/HONORARIUM

Details of the Claimant / Guest Speaker

Name : _____
Designation : _____
Organization : _____
Mobile No. : _____
Email Id : _____
PAN (copy to be attached) : _____
Claim Amount : _____
In Words : _____

Bank details of the beneficiary for NEFT/RTGT

Bank Account Holder Name : _____
Account No. : _____
Name of Bank : _____
Branch : _____
IFSC : _____

Details of the Event/Lecture delivered

Topic : _____
Date : ____/____/____ Timings : _____

DECLARATION

I _____ hereby declare that I am aware of the fact that above said claim for remuneration/honorarium will be settled with due compliance of rules & regulations in regards to TDS as defined by the Department of Income Tax, Govt. of India and also authorize the institution to settle the claim through electronic transaction/transfer in the above said bank account.

Date: ____/____/____

(Signature of Claimant)

Remarks from concerned Event Coordinator / HoD

The guest has delivered a lecture on the above said topic and was found _____

Date: ____/____/____

Name: _____

(Signature)

Comments/Remarks of Registrar	Approval of the Director
_____ Date : ____/____/____ (Signature)	_____ Date : ____/____/____ (Signature)

Use of Account Section Only