



**CLAIMS FORM FOR REMUNERATION / HONORARIUM/ SITTING CHARGES**

Date:.....

1. Name / Designation / Address: .....  
.....  
.....
2. Details of Pay Structure: ..... Basic Pay .....
3. Nature of Duty and date: .....
4. Remuneration / Honorarium Rs .....  
(In words.....)

5. Bank Details:

1	Name of Beneficiary	
2	Name of Bank	
3	Address of Bank	
4	Bank Account no.	
5	Account Type	Saving/Current/Other
6	IFSC Code	
7	PAN No.	
8	Mobile Number	Email:

Verified

Signature with date

Amount Received Rs. ....

Signature