

**SPONSORED RESEARCH & CONSULTANCY CELL**  
**NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR**  
**CONSULTANCY / TESTING MONEY RECEIPT ISSUE APPLICATION FORM**

SF-2B

Department: - .....  
 Name of Consultancy/Testing in-Charge /P.I.:- .....  
 Job Ref No.:- .....  
 Date: - .....

Please allow Mr.....  
 On behalf of M/s & Address .....

with GSTIN NO.....

to deposit an amount as detailed below for the purpose of “ .....”

Mode of payment: - Cash / Online transfer / Cheque / Demand Draft.

Details of payment: .....

Total amount received as Gross Consultancy Charge (X)

Rs.....

Service Tax (as applicable) (T)	Rs.
Project Amount (Y= X – T)	Rs.
Institute Overhead (I= 0.3Y / 0.4Y) (Tick Appropriate one)	Rs.
Expenditure (E)	Rs.
Consultancy Fee ( B=0.7Y/0.6Y – E)	Rs.
<b>Total</b>	Rs.

Rupees

.....  
 ..... Only.

\_\_\_\_\_  
 Signature of Consultancy / Testing in-Charge / P.I.  
 with Stamp

- Enclosures:** - 1. Registration of Consultancy Project {approved by Dean (R&C)}  
 2. Fund transfer voucher from funding agency.