Ref. File No.

**Audited Statement of Accounts (AC)**

**Title of the Project:**

**Name of the Project Director:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.No.** | **Heads of Expenditure** | **Percentage Allocation to Total Budget of****the Study** | **Actual Value as per the Study** | **Actual Expenditure** |
| 1 | Research Staff : Full time/Part-time/Hired Services | Not exceeding 45% of the total budget. |  |  |
| 2 | Fieldwork:Travel/Logistics/Boarding, etc.  | Not exceeding 35% |  |  |
| 3 | Equipment and Other Items: computer, printer etc. (assets and books) | Not exceeding 10% |  |  |
| 4 | Contingency | Not exceeding 5% |  |  |
| 5 | Publication of Report\* | 5%\* |  |  |
|  | Total | **100%** |  |  |

\*The five percent (5%) publication amount will be retained by the ICSSR & will be spent by the ICSSR Publication Division if the Final report is found publishable by an Expert Committee constituted by the ICSSR.

|  |  |
| --- | --- |
| Registrar(University)/Principal(College)/Director(Institute)(Signature with Seal) | Project Director(Signature with Seal) |

Certified by the C.A. with UDIN No. (Signature with Seal)

Note: Chartered Accountant(CA)’s signature is not required for the institution where audit of accounts of the affiliated institution is done by CAG/AG.