



**RESEARCH MANAGEMENT CENTRE**

**RESEARCH CLAIM FORM**

**INSTRUCTION:**

1. Please ensure the following **documents are attached** with the completed form.
2. All expenses must adhere to the General / Funder Guidelines for Research Funding and IIUM Financial Policy.
3. Researcher is responsible to get the approval from the relevant authority prior to purchase.

**CHECKLIST:**

No	Items	Check List (Please tick)
1	Completed Form with signature	<input type="checkbox"/>
2	<ul style="list-style-type: none"> <li>• <b>Original receipts</b> sorted according to Votes (pasted on A4 paper)</li> <li>• All receipts &amp; related documents <b>must be verified</b> by Head of Research (Sponsored Research &amp; Internal Grants) / Asst. Director of RMC</li> </ul>	<input type="checkbox"/>
3	Proof of expenses:	
	Conversion proof for expenses not in Ringgit Malaysia – Oanda.com	<input type="checkbox"/>
	Copy of online transaction ( <i>if payment through online</i> )	<input type="checkbox"/>
4	Registration claim – <ul style="list-style-type: none"> <li>• Copy of approval form for Attending Seminar/ Conference / Workshop / Training</li> </ul>	<input type="checkbox"/>
5.	Publication fee claim – <ul style="list-style-type: none"> <li>• Full Article with acknowledgement to the funder</li> <li>• Invoice</li> <li>• Proof of payment</li> <li>• Acceptance of Article</li> <li>• Evidence that the journal is currently indexed by WoS – SCOPUS – ERA</li> </ul>	<input type="checkbox"/>

FOR OFFICE USE	
Document Complete / Incomplete	<b>Received by:</b>
Date: .....	Name: .....
	Position: .....

A REQUESTOR DETAILS				
Date:				
Name of Requestor :			Staff No. / Matric No.:	
K / C / D / I :			Tel No. / Mobile No. :	
Project ID :				
Project Title:				
B CLAIM DETAILS				
NO.	ITEMS	RESEARCH VOTE	IUM VOTE	AMOUNT (RM)
1	<b>Rental</b>	V24000		
	Ship and Boat Rental		B24110	
	Other Machinery Rental		B24114	
	Other Rental ( <i>Car / Computer etc</i> )		B24199	
2	<b>Research Material and Supplies</b>	V26000 (E-SCIENCE) / V27000		
	Stationery ( <i>related to research only</i> )		B27102	
	Disposable Science Supply		B27503	
	Research Material Supplies		B27505	
	Research Equipment and Supplies ( <i>Contract Research only</i> )		B27508	
	Computer Software and License		B27701	
3	<b>Maintenance and Minor Repair Services</b>	V28000		
	Machinery Maintenance and Repair		B28351	
	Computer Maintenance and Repair		B28651	
	Scientific Equipment Maintenance and Repair		B28751	
	Civil Maintenance ( <i>Installation of partition for Laboratory as approve in the proposal</i> )		B28401	
4	<b>Professional Services and Other services</b>	V29000		
	Scientific and Research Services ( <i>Analysis / Sampling</i> )		B29115	
	Patent / Copyright / IP		B29136	
	Advertising and Publication Services (fee)		B29120	
	Other Services ( <i>Data subscription / Renewal of Software License</i> )		B29199	
	Printing / Photocopy		B29201	
	Entertainment / Refreshment ( <i>related to research only and subject to Government Policy</i> )		B29401	
	Honorarium ( <i>Enumerators / Proof reading / Editing / Consultant fee / Research Assistant</i> )		B29404	
	Conference / Seminar / Workshop / Training Fee (local)		B52102	
	Conference Fee (Overseas)		B52103	
	Special Program ( <i>Focus Group Discussion</i> )		B52207	

<b>5</b>	<b>Equipment</b>	<b>V35000</b>		
	Asset ( <i>RM5,000 and above</i> )			
	AV Equipment		<b>A35501</b>	
	ICT Related ( <i>Workstation / Laptop / iPad, Hand Phone, Printer – as approved in the original proposal</i> )		<b>A38101</b>	
	Scientific Equipment		<b>A39401</b>	
	Inventory ( <i>RM500 – RM4,999.99 per item</i> )		<b>B27801</b>	
<b>TOTAL CLAIM</b>				
<b>THE CLAIM IS PAYABLE TO:</b>				

**C DECLARATION BY REQUESTOR**

<p>I, the requestor of the above, hereby declare that all receipts attached are genuine and the claims are true.</p> <p>Signature: _____</p> <p>Date : _____</p>	<p><b>VERIFIED BY:</b> <i>(if requestor is not the Principal Researcher)</i></p> <p>Principal Researcher's : _____ Signature</p> <p>Stamp:</p> <p>Date: _____</p>
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**D APPROVAL BY:  
HEAD OF RESEARCH / DEPUTY DEAN (POSTGRADUATE & RESEARCH) / DEPUTY DIRECTOR (RMC)**

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	Comment: _____
Signature: _____		
Stamp:	Date:	

