Annexure - I

## APPLICATION FORM FOR REIMBURSEMENT OF RESIDENTIALTELEPHONE / MOBILE / BROADBAND CHARGES

## (To be filled by the Officer claiming reimbursement)

(Part A)

NAME				Bank A/c No.						
DESIGNATION TELEPHONE Nos.						BILL No.	DATE	PERIOD		AMOUNT
								FROM	ТО	
Tel.										
Mob								+		4
Broadband	YES	NO dmissible amount cla						GRAND	TOTAL	

The bills, in original with call details, are enclosed for reimbursement.

Signature of the user official

Dated

(Part B) G.A. Section

To be filled by G.A. Section	Passed Amount Remarks	-

The bills are in order and may be passed for payment. J.D.(E) may kindly sign the Pay Order.

A.D.(GA)

J.D.(GA)

J.D.(E)

(Part (C)

Pay Rs.\_\_\_\_(Pay rupees\_\_\_\_\_

(Drawing & Disbursing Officer)