	BANK	ACCOUNT NO
tified for the quarter ending		
RTIFIED THAT:		
Motor car/Scooter flat rate	reyance allowance @Rsvide ministry of Health & F.W. BF	P.M. for the maintenance for RS No A. 27083/8/97 CHS V(A) & (3)
dt 2/11/89 2) I am maintaining a Carname.	Scooter whose registration No is	and it is in my
3) I was not on leave/Joinin	g time/Temporary transfer during the	nis period.
I was on leave from	to	·
	was maintained by me and was a wance has been claimed.	vailable for use during the period for
5) The conveyance allows Min. of Health & F.W. used my conveyance to quarter computered for quarter per month were	ance is being drawn by me in fulf letter No A-28023/2(8)/97-CHD vo visit hospital/official journey mo these (3) in a month period. The n as under:-	illment for condition (2) laid down in V dated 10/11/87 & 2/11/89 i.e. I have re that 15 days in a month during the umber of visits made by me during the ire was not less than the amount of CA
claimed.	NE SIDE DISTANCE (in km)	NO. OF VISITS
claimed.	NE SIDE DISTANCE (in km)	NO. OF VISITS
claimed.	NE SIDE DISTANCE (in km)	NO. OF VISITS
claimed.  MONTH O  7) Certified that the daily	allowance or mileage allowance us of 8 kms within the city Municip	NO. OF VISITS   for journey on official duty whether oal limits has been drawn by me during
7) Certified that the daily within or beyond a radi the quarter ending	allowance or mileage allowance us of 8 kms within the city Municiper THE DATE LETTER	for journey on official duty whether oal limits has been drawn by me during  SIGNATURE
7) Certified that the daily within or beyond a radi the quarter ending	allowance or mileage allowance us of 8 kms within the city Municip	for journey on official duty whether oal limits has been drawn by me during  SIGNATURE
7) Certified that the daily within or beyond a radi the quarter ending	allowance or mileage allowance us of 8 kms within the city Municip	for journey on official duty whether oal limits has been drawn by me during  SIGNATURE
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7) Certified that the daily within or beyond a radi the quarter ending	allowance or mileage allowance us of 8 kms within the city Municiperate DATE DATE LETTER  rerified and found correct in term	for journey on official duty whether oal limits has been drawn by me during  SIGNATURE  SIGNATURE  Certified as of general orders under which the  CONTROLLING AUTHORITY MEDICAL SUPERINTENDENT
7) Certified that the daily within or beyond a radi the quarter ending	allowance or mileage allowance us of 8 kms within the city Municip	for journey on official duty whether oal limits has been drawn by me during  SIGNATURE  SIGNATURE  Certified as of general orders under which the  CONTROLLING AUTHORITY MEDICAL SUPERINTENDENT

ACCOUNTS OFFICER