

Performa of Claiming of Medical Re-imbursement of Bills.

- 1 Name of the claimate:& designation
- 2 Amount claimed for :-
- 3 Name of patient:-
- 4 Relation with the claimate:-
- 5 Name of Hospital:-
- 6 Duration of treatment:-
- 7 Basic pay:-

Manjit Kaur, Lecturer Punjabi
49,112/-
PAHUL
Daughter
Dayanand Medical College & Hospital Managing Society Ludhiana
29/10/2022 - 05/11/2022
85400/-

Amar Shaheed Lala Jagat Narayan G.G.S.S.School
Nehru Garden Jalandhar

- 8 Branch in which working

- 9 Name of the dealer from whom the Medicines purchased and No. & date along with total amount issued by him.

Dayanand Medical College & Hospital Managing Society Ludhiana

Name of the dealer	Cash memo	Date	Total
As per list attached			
	TOTAL		49,112/-

Amount: Forty Nine Thousand One Hundred Twelve Only

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Signature of claimate

Declaration

- 1 I here by declare that the medicines purchased by the patient hav been entirely consumed.
- 2 I here by declare that the treament for which the charge is being Preferred during theout of the treatment.
- 3 I here by declare that the treatment for self dependent for the above referred period has been got from the dispensary... Dayanand Medical College & Hospital Managing Society Ludhiana and further certified that the claim for which has been referred previosly will not be referred in future.
- 4 Further declare that dependent family mamber is being claimed is not employed any where and has not source of incom
- 5 I hear by declare that __NA___n respect of whom __NA__ Medical reimbursement from is being clamed is working as ----- in the office of ----- and he is not claming medical reimbursement from his office
- 6 I hear by declare that depended PAHUL

residing with Me .

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Sig.of claimate.

Detail of medical reimbursement bill

1 Employee's name:- **Manjit Kaur, Lecturer Punjabi**
2 Husband/ Father name's name: Sanjeev Teji
3 Designation:- **Lecturer Punjabi**
4 Basic pay:- **85400/-**
Amar Shaheed Lala Jagat Narayan G.G.S.S.School
5 office Address:- Nehru Garden Jalandhar
6 Home address:- EG 1019, Mohalla Gobindgarh, Jalandhar
7 Patient' name:- PAHUL
Age:- 09 year
Relation with employee:- Daughter
Name of disease : cen Scarlet fever with Hypovitaminosis D, Overweight
Treatment period:- 29/10/2022 - 05/11/2022

8 Name of Hospital:- At Dayanand Medical College & Hospital Managing Society Ludhiana

9 Amount claimed:- **49,112/-**

10 Type of claim :- Self/Dependent **Dependent**

Income of dependent:- -

To be Certified by DEO:-

Are all required documents attached?	Yes/No
Approval from health dept. received?	Yes /No
Amount approved :-	Yes /No
Is medical certificate of doctor attached?	Yes /No
Has bills been submitted in time?	Yes /No

Name of the dealing officer:-

Designation:-

Branch:-

Status of bill:-

Pending / rejected /sanctioned

If sanctioned:-

Amount approved:-

Date of approval:-

Remark

APPENDIX 'D'

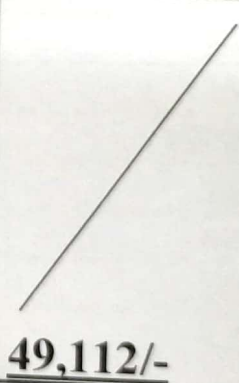
ESSENTIALITY CERTIFICATE

I certify that Miss. PAHUL D/o Smt. Manjit Kaur Lecturer Punjabi in the Amar Shaheed Lala Jagat Narayan Govt. (G). Sen. Sec. School Nehru Garden Jalandhar under my treatment at the Dayanand Medical College & HOSPITAL Managing Society Ludhiana.

Hospital/my consulting room and that the under mentioned medicines prescribed by me in this connection were absolutely essential for the treatment and recovery/prevention of serious deterioration in the condition of the patient. The medicines were not stocked in the -----.

Dayanand Medical College & HOSPITAL Managing Society Ludhiana for supply to entitled patients and do not include priority preparations for which cheaper substitutes of equal therapeutic value are available nor preparations which are primarily food toilets or disinfections.

1. Certified that treatment as in-patient was not necessary.
2. Certified that the medicines charged have no cheaper effective substitute.
3. Period of treatment from 29/10/2022 - 05/11/2022.
4. Certified the price claimed is reasonable.
5. Certified that the medicines are not in the nature of tonics, etc., the cost of which is not re-imbursable under Government orders issued on the subject from time to time.
6. Certified that the medicines prescribed are not in the list of employees by the D.G.H.S New Delhi, vide his No.S(1 4)- 1 I/4/74/MC.dated 12-09-1974 as amended from time to time which has been made applicable mutatis mutandis to Punjab Government employees, vide Pb. Government Memo No. 1164-4 HB-61/53159. dated 21-12-1961.
7. He was suffering from Scarlet Fever With Hypovitaminosis D, Overweight..

1	2	3	4
Name of Medicines	Outdoor ticket No. & Date on which prescribed	Date on which actually purchased	Price Rs.P.
As per Bills Attached			 49,112/-

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Countersigned Signature and Designation of
the Civil Surgeon Authorized Medical
Attendant

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Detail of Bills in respect of expenditure occurred on the treatment of Mis Pahul D/o Smt. Manjit Kaur (Lec. Punjabi) in Amar Shaheed Lala Jagat Narayan GGSSS Nehru Garden Jalandhar is as below:

Sr no.	Cash Memo/Bill	Date	Amount
1	83401	29/10/2022	1411/-
2	83404	29/10/2022	71/-
3	AP1545206	29/10/2022	5500/-
4	180109	29/10/2022	342/-
5	180195	30/10/2022	62/-
6	104993	30/10/2022	70/-
7	88966	30/10/2022	178/-
8	180906	30/10/2022	501/-
9	181248	31/10/2022	165/-
10	182283	01/11/2022	337/-
11	182593	01/11/2022	141/-
12	182661	01/11/2022	19/-
13	182720	01/11/2022	61/-
14	AP1547197	01/11/2022	750/-
15	AP1547207	01/11/2022	1800/-
16	183214	02/11/2022	249/-
17	90365	02/11/2022	151/-
18	AP1549022	03/11/2022	29000/-
19	185148	04/11/2022	160/-
20	37097	05/11/2022	472/-
21	185740	05/11/2022	201/-
22	183991	05/11/2022	335/-
23	181807	05/11/2022	32/-
24	20330	05/11/2022	7104/-
Total: Forty Nine Thousand One Hundred Twelve only			49,112/-

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