## राष्ट्रीय भौतिक प्रयोगशाला

## APPLICATION FOR THE REFUNDABLE CPF/GPF ADVANCE

1.	Name of applicant Shri /	Dr. / Mrs. / Miss		
2.	Employment I.D. No	Designation	Tel. No	
3.	Account No. CPF / GPFPresent Basic Pay			
4.	Amount of advance Rsto be recoverable ininstalments.			
5.	Purpose for which the ad-	vance is reqd		
6.	Advance already drawn,	if any(Yes	/ No)	
the ac	I hereby certify the dvance is applied for.	nat I have no other source to mee	t the above expenditure for which	
Date:		Division / Section	Signature of applicant	
	:- Application may be submof balance.		ch CPF / GPF Cell for certification <b>HOUT I.D. NUMBER</b>	
		ACCOUNT BRANCH (CPF / GPF CELL)		
Name		Designatio	.Designation	
Emp.	I.D. No	CPF / GPF A/C No		
Balance upto		is Rs	including refund of	
		instalments of Rs	each out of	
previ	ous advance of Rs			
	THIS IS THE	ADVANCE DURING THE CU	JRRENT FINANCIAL YEAR.	
	Gen. Section may kindly	sanction the above advance if ad	missible under the rules.	
DEA	LING ASSTT.		SECTION OFFICER (F & A)	

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