

FROM NO.3

( See Rule 17)

MEDICAL CERTIFICATE FOR GOVT. SERVANTS RECOMMENDED LEAVE  
OR EXTENSION OF LEAVES OF COMMUTATION OF LEAVE

I Dr Manie Kumbh after careful personal examination  
of the case here by certify that ~~Shri/Smt./Ku~~ Mrs. Harsha Mulchandani <sup>40y</sup>  
whose signature is given above is suffering from Early prosth. asst. and  
I consider that a period of absence from duty of 30 day (thirty day) <sup>with</sup>  
effect from 21/12/16 is absolutely necessary for the restoration of  
his / her health.

[Signature]  
Authorized Medical Attendant  
..... Hospital/  
Dispensary of other Registered  
Medical Practitioner.