


|   |              |   |                              |                   |
|---|--------------|---|------------------------------|-------------------|
|    |              | <b>Application for reimbursement of Mobile Hand-set procured for official purpose</b> |                              | Date<br><br>Place |
| Name<br><br>Department  |              | Emp No.   |                              |                   |
| Designation   |              | Grade   |                              |                   |
| In accordance with the Corporation's Scheme for provision of Mobile phone facility to officers, I request you to reimburse me the cost incurred on purchase of mobile hand-set for the ceiling prescribed for my grade, whichever is lower. |              |   |                              |                   |
| Sl.No.  | Make & Model | Name & Address of vendor  | Receipt / Bill No. & Date    | Amount (Rs.)      |
| Date : _____ Signature _____  |              |   |                              |                   |
| <b>For use of HR Dept.</b><br>The details of the Mobile hand-set purchased by the officer has been entered in the record. Finance Department may process the claim for payment.   |              |   |                              |                   |
| Date : _____ Signature _____  |              |   |                              |                   |
| <b>For use of Finance Dept.</b>   |              |   |                              |                   |
| P.C Voucher No.   | Dated:       |   | A/C Code:                    |                   |
| Passed for payment of Rs. _____<br>(Rupees in words _____)  |              |   | A/C Head:                    |                   |
| Asstt. / Accountant   |              |   | Received payment             |                   |
| A.O / SAO   |              |   | Date : _____ Signature _____ |                   |