

CLAIM FOR LEAVE TRAVEL CONCESSION
(Under 1250 Kms. Scheme)

Diary No.

Date:

Name	Designation	Empl.No.	Department	Basic Pay
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Period of absence	Block Year	LTC Availed Under	Headquarters/Place of Commencement of journey	Name(s) of Place(s)
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From	Sub-Rule 'A/'
To	Sub-Rule 'B'

Details of Family Members:

Sl.No.	Name	Relationship	Age
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1. Certified that:

- (i) The members of the family for whom the claim is made are entitled to the concession as per rules and no claim has been made earlier for these journeys against the block year mentioned above.
- (ii) My husband/wife is employed in(Name of Organization) but he/she has not claimed and will not claim the concession/fare against aforesaid block year and for the members of the family as indicated above from his/her Organization.
(To be filled up where no advance was drawn)

2. Certified that:

- a) I and my family members whose particulars are given above have traveled a distance of not less than 1250 Kms. (each way) for visiting aforementioned place(s) from headquarters.

- b) For the purpose of my/our visit to place(s) mentioned above the expenditure incurred by me was not less than Rs. ----- which may be paid to me. ,
(To be filled up where an advance was drawn)
3. a) With reference to my application for the LTC advance, this is to declare that for the purpose of my/our visit to the place(s) mentioned therein, the expenditure incurred by me was not less than Rs.
- b) Advance of Rs.had been drawn by me.
- c) The balance of Rs. may please be paid to me.

Date:

Signature of the employee

Countersigned

Signature of the
Competent Authority

Date:

Name:

Designation:

(For use by Personnel Department)

- A. Certified that the claim has been verified with reference to LTC Sanction Order/eligibility and found to be in order. Entry has been made in his/her personal records.
- B. Ref. No. _____ LTC Order No. _____ dated LTC claim for the Block Year under 1250 Kms. scheme of Sub rule 'A' /Sub-Rule 'B' for employee and/or family members mentioned above has been verified with reference to eligibility and found to be in order.

Date:

P.O./Sr. P.O.

(For use by Accounts Department)

Passed for payment of Rs. _____ Received Rs. _____

(Rupees _____) (Rupees: _____)

Debit Code _____

Acctt./Sr. Acctt.

Sr .AO/ AO

Date

Signature of the employee

Strike out whichever is not applicable.