

Congingent Bill for Reimbursement of Special Cash package in lieu of LTC			
CDA A/C No		Personal No.	
Officer's Name		Re- Employed	Yes/No
Marital Status	Married/Unmarried	Spouse Employed (in Army)	Yes/No
		Whether spouse availed this scheme	Yes/No
		Year	2020/2021

CORPS		Pay Level	
		Basic Pay	
Are You doctor or not ?	Yes/No	NPA(in Rs.)	

Whether opted for Leave Encashment ?		Yes/No	LTC to be claimed for (yr)	2020/2021
No of Persons		Air Fare claimed	No of person XRs 20,000 (Economy) Rs 36,000(Business)	Rs
Name	Relationship			
Leave Details				
No of days already encashed on LTC		Year	No. of Days	
No. of days to be Encashed(Max. 10 days)	DO II NO ....			RS
Amount as per Invoice(in Rs.)				RS
Amount entitled ( Air fare X3 + Encashment)				RS
Advance drawn(in Rs.)				Rs
Balance(in Rs.)				Rs

Encl : 1. Original Invoice(s) 1,2,3...
2. Proof of Digital payment
3. DO II for encashment
Date:

Signature	
CDA A/c No.	

Counter signed with Seal