**OFFICE OF THE PRINCIPAL DIRECTOR OF AUDIT(CENTRAL)CHENNAI,**

**LEKHA PARIKSHA BHAVAN, No. 361, ANNA SALAI, CHENNAI 600 018**.

**Certificate**

Name of the Applicant :

Designation :

Department :

Pay level & Basic Pay (Rs.) :

I certify that i have spent Rs.\_\_\_\_\_\_\_\_\_ towards purchase of Newspaper(s)

for the months of :

1. January 20 to June 20

 OR

II) July 20 to December 20

 (Only one option is to be ticked)

 I further declare that I) The Newspaper (s) in respect of which reimbursement is claimed is/are purchased by me. II) The amount for which reimbursement is being claimed has actually been paid by me and has not/will not be claimed by any other source.

Date: Signature

 Name: