

OFFICE OF THE DIRECTOR GENERAL OF AUDIT, SCIENTIFIC DEPARTMENT, KOLKATA BRANCH,
2nd MSO BUILDING, (6th FLOOR), NIZAM PALACE, 234/4, A.J.C. BOSE ROAD, KOLKATA-700020
“REIMBURSEMENT OF MEDICAL EXPENSES”

NAME AND DESIGNATION: -

Sl No.	Patient relationship	Nature of illness	Duration of illness	The Consultation charges	Claim Fees for pushing injection	Cost of Medicine	Pathological charges	Total claim	Less inadmissible item	Total amount admissible	Remarks
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Claims are in order and if approved this may be admitted for

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A.A.O.(ESTT.)

SR. AUDIT OFFICER

DIRECTOR