

Tender Corrigendum-2

Tender No- 44-ISW-2019-Development of web based application for Management of Pay and other entitlement work in IAAD.

Tender ID: 2019_CAG_508831_1

With reference to above Tender ID, the clarification on the queries received from the prospective bidder are given below.

All other terms and conditions of the tender remain unchanged.

**Suresh Kumar Thulsiram
Administrative Officer (IS)**

S.No	RFP document reference(s) (Section)	RFP reference (s) (page number)	Content of RFP requiring clarification(s)	Points of clarification/Suggestion	IS Wing comments/reply
1	SECTION – I Request for Proposal (RFP)	Page No. 3	A firm will be selected under Quality cum Cost Based System (QCBS) Method and procedures described in this RFP	In QCBS selection, it seems evaluation will be on Technical and commercial 60:40 with 60 marks qualifying in technical evaluation. Bidder would suggest CAG for considering 70:30 where more qualitative selection will be there. Also technical qualifying should be 70 marks. We would request for your kind consideration.	Clause Retained as per RFP.
2	Section 1	Page-4,	End date and time for submission of proposals - 29.10.2019 3.00 PM	We request to provide 8-10 working days for proposal submission after the issuance of clarifications by client. Please consider the extension of last date of submission of queries to 10-Nov-2019	Last Date of submission of bids has already been extended upto 8th Nov. 2019.
3	SECTION - II INSTRUCTION TO BIDDERS 1. Bidder Related Conditions	5	e) The Proposal shall be based on the number of Professional staff-months estimated by the Bidders. While making the proposal, the Bidder must ensure that it possesses the minimum number and type of experts as sought by the CAG, failing which the proposal shall be considered as non-responsive. Only one curriculum vitae (CV) may be submitted for each position of Professional staff sought by the CAG for the purpose of Technical evaluation.	1. Do we need to submit CVs of resources other than Project Manager, Sr. Developer, Developer, UI Designer also? If yes, then please provide list of resource types. 2. Please also provide required Qualification and Experience for each type of resource.	1. The bidder needs to provide CVs of all resource persons actually planned to be deployed exclusively for the proposal. 2. Not specified as such but expectations would be for a basic graduate qualification and relevant experience at least in the relevant area/related area.

4	Clause 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page No. 9	1. Past Experience-1 The Bidder should have experience in Development of Web Enabled Application/Portal/Website of value between 20 to 25 lakhs for any Govt. Dept. (Govt. of India) / State / Central Government in last 5 Yrs, completed a minimum of 5 projects.	a.) It is tough to find work order between a given value range only i.e. 20 to 25 Lakh. We would request department to kindly remove range parameter by allowing higher any value with minimum work order value 20 Lakh. We assume this will not affect any bidder select criteria quality. b.) We assume that we need to submit more than 15 projects work orders out of which 5 projects should be completed and Completion Certificate to be submitted for the same to score full marks i.e. 20. Please confirm.	<p>Past Experience-1 The Bidder should have experience in Development of Web Enabled Application/Portal/Website of value 20 lakhs and above for any Govt. Dept. (Govt. of India) / State / Central Government / Private Sector in last 5 Yrs, completed a minimum of 2 projects.</p> <table border="1" data-bbox="1461 370 1946 524"> <thead> <tr> <th>Sl.No.</th> <th>Range of Experience</th> <th>Marks</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>5 Projects</td> <td>20</td> </tr> <tr> <td>2</td> <td>4 Projects</td> <td>15</td> </tr> <tr> <td>3</td> <td>3 Projects</td> <td>10</td> </tr> <tr> <td>4</td> <td>2 Projects</td> <td>5</td> </tr> </tbody> </table>	Sl.No.	Range of Experience	Marks	1	5 Projects	20	2	4 Projects	15	3	3 Projects	10	4	2 Projects	5
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5	S.No. 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page No. 9-10	Past Experience-1 The Bidder should have experience in Development of Web Enabled Application/Portal/Website of value between 20 to 25 lakhs for any Govt. Dept. (Govt. of India) / State / Central Government in last 5 Yrs, completed a minimum of 5 projects.	There are many work orders in number asked for, where value range 20 to 25 Lakh asked. Please consider 20 Lakhs and above.	(Total Marks -20)															
6	Technical Bid Evaluation	Page-9,	Past Experience-1 The Bidder should have experience in Development of Web Enabled application/ Portal/ Website of value between 20 to 25 lakhs for any Govt. Dept. (Govt. of India) / State / Central Government in last 5 Yrs, completed a minimum of 5 projects	We have done many projects with variable costs. Can the clause of 20-25 lakhs can be changed to 20 lakhs or above. Please reply.																
7	S.No. 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page No. 9-10	Past Experience-1 The Bidder should have experience in Development of Web Enabled Application/Portal/Website of value between 20 to 25 lakhs for any Govt. Dept. (Govt. of India) / State / Central Government in last 5 Yrs, completed a minimum of 5 projects.	Bidder need to submit 5 completed projects completion certificate in every range of project. Please Reply.																

8	Technical Bid Evaluation	Page 9	<p>Point 1 of Evaluation Criteria: Past Experience-1 The Bidder should have experience in Development of Web Enabled Application/Portal/Website of value between 20 to 25 lakhs for any Govt. Dept. (Govt. of India) / State / Central Government in last 5 Yrs, completed a minimum of 5 projects.</p> <p>Bidder should submit the following: a) Bidder should submit the PO / Work orders. b) Work completion certificates / projects duly signed by the authorized signatory from the Client end.</p>	<p>We request the clause to be modified such that maximum marks be awarded (i.e. 20 marks under this slab) to bidder who can showcase 10 plus UAT certified projects of value greater than INR 20 Lakhs for any Govt. Dept. (Govt. of India)/State/Central Government in last 5 years.</p>	
9	Clause 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page No. 9	<p>Past Experience-2 The Bidder should have expertise in Development of Similar Web Enabled Application of value more than 25 Lacs in last 5 Yrs, for any Govt. Dept. (Govt. of India) / State / Central Government. 2.5 Marks for each work order subject to maximum of 10 marks.</p>	<p>This criteria is asking for many parameters like Web Application, Similar application, Value not less than 25 Lacs, In 5 Years, Government Department, Completion Certificate also. We understand department will not compromise with bidder quality, some small We would request department to kindly give some relaxation in this criteria for more participation by removing duration i.e. within 5 Years and completion letter requirement. Please consider.</p>	<p>Past Experience-2 The Bidder should have expertise in Development of Similar Web Enabled Application of value more than 25 Lacs in last 5 Yrs, for any Govt. Dept. (Govt. of India) / State / Central Government / Private Sector. For completed projects, 5 marks will be considered for each completed work order subject to maximum 10 Marks in this category. For non-completed projects under this category, the firm who gives UAT completion certificate from department and also attached on-going certificate issued by department stating that</p>
10	S.No. 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page No. 9-10	<p>Past Experience-2 The Bidder should have expertise in Development of Similar Web Enabled Application of value more than 25 Lacs in last 5 Yrs, for any Govt. Dept. (Govt. of India) / State / Central Government. 2.5 Marks for each work order subject to maximum of 10 marks.</p>	<p>Here tough to score 10 marks as there are many clauses, We would request for 5 marks weightage to be given each work order in case of completed else you may give 2.5 marks each order. Also in case of completed project, you may ask completion within 5 Years not work order date should be in 5 Years. We understand CAG address our concern for participation.</p>	<p>more than 25 lakhs payment of total work orders have been released to the firm by the department, will be given 2.5 marks for each work order subject to maximum of 10 marks. Similar means application of similar scope i.e. payroll and claims related application. (Total Marks -10)</p>

11	Technical Bid Evaluation	Page 9	<p>Point 2 of Evaluation Criteria: Past Experience- 2 The Bidder should have expertise in Development of Similar Web Enabled Application of value more than 25 Lacs in last 5 Yrs, for any Govt. Dept. (Govt. of India) / State / Central Government.</p> <p>2.5 Marks for each work order subject to maximum of 10 marks.</p> <p>Similar means application of similar scope i.e. payroll and claims related application.</p>	<p>We request the clause to be modified such that maximum marks be awarded (i.e. 10 Marks under this slab) to bidder who can showcase any 1 project of payroll & claims related application of value more than 20 Lacs in last five years for any Govt. Dept. (Govt. of India)/State/Central Government.</p>	
12	Clause 4 : Bidder Evaluation Criteria 4.2 Technical Evaluation Criteria	Page 10	<p>Only bidders who score more than 60 (sixty) marks in Technical Evaluation process will qualify for Commercial Evaluation process. Manpower work orders will not be considered for evaluation.</p>	<p>Referring to RFP, you are asking for QCBS selection with 60% weightage to technical and 40% weightage to financial with 60 marks qualifying in Technical. Going through the project scope, we would request department for quality bidder selection, selection criteria under QCBS 70% weightage to technical and 30% weightage to financial with 70 marks qualifying in Technical to be given. Please consider.</p>	<p>Clause Retained as per RFP.</p>
13	S.No. 4 : Bidder Evaluation Criteria 4.3 Commercial Evaluation Criteria	Page No. 10	<p>Component A - Requirement analysis, Design, Development and testing of application including 1-year warranty (Warranty period of one year starts from the date on which all phases of the contract have been delivered successfully- Year 1) and hosting of application in the NIC server.</p>	<p>Bidder understands that Warranty Cost for 1 Year should be included in development. Please reply.</p>	<p>Clause Retained as per RFP.</p>

14	5. Payment Terms	Page 12	ii. Post Implementation one year warranty support payment as per agreed quoted cost implication.	In BoQ, asked for combined cost for development and one year warranty support. What will be the payment bi-furcation for development and warranty support. Either Warranty support cost should be taken separately or may be CAG can ask for %age for warranty support. Kindly reply.	Combind cost for development one year warranty support to be given in the BOQ publish. The firm selected after bidding process will have to submit the summary of cost for Component A & B as prescribed in Form 12A & 12B of RFP. The payment of Post implementation warranty support shall be made as per Clause-5 of Section-II of RFP.
15	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 20	4. a.) Phase-I: TA bills, LTC/HTC claims, medical claims, education allowances, staff loans and advances and all other employee related payments	Is there any further Phases in this project? We assume under this RPF only one phase development as per scope will be consider. Any further phase development will be there then that will be considered under Change Request or separately.	The entire project is to be completed in only one phase development.
16	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 20	5. The proposed system does not take away the administrative powers vested with various officials in the existing system. For instance, in case of LTC, the approval for performing the LTC would continue to be accorded by the Competent Authority as per the existing codal provisions. Once the LTC is approved, the employee will have to scan a copy of the approval and upload it as a supporting document while entering details of the LTC claims. Similarly, approval of purchase and award of contract would vest with the various offices as in the present system. Only the processing of payments will be made centrally at the SSC.	We understand administrative approval for allowances will not be the part of system workflow, after offline/existing mode of approval only employees will upload claim here on the application with approval copy. Please confirm.	Initial admin approval is not part of approval. However during processing of the claim admin approval workflow will be part of the system.

17	Clause-5	Page 20	<p>The proposed system does not take away the administrative powers vested with various officials in the existing system. For instance, in case of LTC, the approval for performing the LTC would continue to be accorded by the Competent Authority as per the existing codal provisions. Once the LTC is approved, the employee will have to scan a copy of the approval and upload it as a supporting document while entering details of the LTC claims. Similarly, approval of purchase and award of contract would vest with the various offices as in the present system. Only the processing of payments will be made centrally at the SSC.</p> <p>Note:- No administrative approval for allowance will be the part of the system workflow. After the approval is done two level authorization that is required for the allowances.</p>	<p>We understand that the authority for granting approval for execution of LTC by employee will remain 'as-is' in present/existing system. However, for raising claims, an interface has to be provided in the envisaged system to the employees for entering claim amount against various heads for approval/rejection at Branch &/or field offices and finally at SSC.</p> <p>Please validate our assessment.</p>	Yes
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18	Section - III: Scope of Work and Deliverables, Phase : Employee Related Claim	Page 20	9. In case of salary/arrear etc., concerned field office/head office will send the basic documents to the SSC and the SSC will authorize payments to be credited to the employees' bank accounts. In all other cases, based on the information entered by the employees and after checking the supporting documents, SSC will process the claims and authorize payment to be credited to the employees' bank account.	Will salary/arrear process will be the part of system, or this system is for bills/claims processing? Please reply.	System is for bills / claims processing only. Salary/Pay arrear is not part of the application. The basic document of salary/Pay arrear will be sent to SSC through the system and after two level authorisation the payment is made through PAO. However, Leave/Suspension period (no of days salary not to be paid) effecting regular pay will be communicated to SSC i.e Recovery of Pay may be communicated to SSC.
19	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 20-21		There will not be any integration like digital signature, payment gateway etc. other than Single Sign On, Email/SMS. Please reply in case of any please share list. Also in case any 3 rd party application integration (internal/external), CAG will share required APIs for integration to the selected bidder. Please reply.	No integration is required at present only approval through SMS / email requires
20	Clause-6	Page 20	The system also does not aim to alter the budget allotment and expenditure control system, which could continue to remain in its present form. The proposed model only envisages centralizing the processing part of the payment of employee claims and entitlements. Note for sl.no. 5 & 6: Budget allotment and monitoring will be through existing system. However, facility may be kept in this system to data entry the allotted funds.	We understand that by processing it is meant automating a workflow for approval/rejection of claims and not disbursement of funds. Please validate our assessment. If budget allotment and monitoring will be through the existing system, please explain the rationale for entering the allotted funds under various heads. Also, please elaborate the scope of work for allotment and monitoring of funds.	Yes No Headwise allotment is to be fed in the system during the Financial year. Subsequently, system must control over expenditure for each heads of account of claims of the employee for the financial year.

21	Section - III: Scope of Work and Deliverables, Phase : Employee Related Claim	Page 20	In case of salary/arrears etc., concerned field office/head office will send the basic documents to the SSC and the SSC will authorize payments to be credited to the employees' bank accounts. In all other cases, based on the information entered by the employees and after checking the supporting documents, SSC will process the claims and authorise payment to be credited to the employees' bank account.	Will salary/arrear process will be the part of system, or this system is for bills/claims processing? Please reply.	System is for bills / claims processing only.
22	Clause-3	Page 20	It is now planned to develop a web-based application for Management of payroll and other employee entitlement work in O/o the Director General of Audit, Defence Services, New Delhi so that these services can be managed centrally from a Shared Services Centre (SSC). On successful implementation of the project at the said office, the roll out of the same can be considered for other field offices within IA&AD including headquarters.	Please elaborate what is meant by Payroll Management. Do we have to make develop entire payroll process or is that only relevant authorities at branch/field offices will upload voucher (or other supporting documents) into the system (for salary/arrears expenses) for viewing/downloading the same at SSC premises and granting form level approval for funds disbursement into the bank acct. of employees. Please validate our assessment and confirm that payment gateway integration will be out of scope of this system.	NO Yes

23	Clause-5	Page 20	<p>The proposed system does not take away the administrative powers vested with various officials in the existing system. For instance, in case of LTC, the approval for performing the LTC would continue to be accorded by the Competent Authority as per the existing codal provisions. Once the LTC is approved, the employee will have to scan a copy of the approval and upload it as a supporting document while entering details of the LTC claims. Similarly, approval of purchase and award of contract would vest with the various offices as in the present system. Only the processing of payments will be made centrally at the SSC.</p> <p>Note:- No administrative approval for allowance will be the part of the system workflow. After the approval is done two level authorization that is required for the allowances.</p>	<p>We understand that the authority for granting approval for execution of LTC by employee will remain 'as-is' in present/existing system. However, for raising claims, an interface has to be provided in the envisaged system to the employees for entering claim amount against various heads for approval/rejection at Branch &/or field offices and finally at SSC.</p> <p>Please validate our assessment.</p>	Yes
24	Clause-6	Page 20	<p>The system also does not aim to alter the budget allotment and expenditure control system, which could continue to remain in its present form. The proposed model only envisages centralizing the processing part of the payment of employee claims and entitlements.</p> <p>Note for sl.no. 5 & 6: Budget allotment and monitoring will be through existing system. However, facility may be kept in this system to data entry the allotted funds.</p>	<p>We understand that by processing it is meant automating a workflow for approval/rejection of claims and not disbursement of funds. Please validate our assessment.</p> <p>If budget allotment and monitoring will be through the existing system, please explain the rationale for entering the allotted funds under various heads.</p> <p>Also, please elaborate the scope of work for allotment and monitoring of funds.</p>	<p>Yes</p> <p>Yes</p> <p>Already given in the RFP</p>

25	Clause-8	Page 20	<p>It must be remembered that the Business Rules relating to various payments need not be automated in the proposed IT solution, as the processing of claims will be carried out manually and only claims is to be processed through the system. The main reasons for not hardcoding the Business Rules are due to (a) the existence of large number of rules relating to various claims and (b) the fact that these Rules are prone to frequent changes. Payment transaction will be out of this system, payment will be processes as per current process only.</p>	<p>It is understood that by processing it is meant that only movement of claim form is envisaged and no calculations have to be performed in the system for arriving at approved claim amount.</p> <p>The max. entitled claim amount under different heads for different employees (designation-wise) would not need to be ported into the system and only actual claim amount has to be entered by employee in the form.</p>	<p>The employee will fill the amount of claim he/she incurred. Which will further process by the SSC. The data of approved amount of all the employees needs to be displayed as authenticated data for budget.</p>
26	Section – III SCOPE OF WORK AND DELIVERABLES	21	<p>Phase I: Employee related claims</p> <p>11. The various employee-related claims to be processed in the proposed system are as follows:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Leave Travel Concession (LTC) <input checked="" type="checkbox"/> Travel Allowance (TA) on Transfer <input checked="" type="checkbox"/> TA on Retirement <input checked="" type="checkbox"/> TA on tour <input checked="" type="checkbox"/> Children Education Allowance/Hostel Subsidy <input checked="" type="checkbox"/> Medical Reimbursement <input checked="" type="checkbox"/> News Paper Reimbursement <input checked="" type="checkbox"/> House Building Advance <input checked="" type="checkbox"/> TA Advance on transfer <input checked="" type="checkbox"/> TA Advance on retirement 22 <input checked="" type="checkbox"/> TA Advance on tour <input checked="" type="checkbox"/> GPF Advance <input checked="" type="checkbox"/> GPF part/final payment <input checked="" type="checkbox"/> Medical Advance <input checked="" type="checkbox"/> Leave Encashment on LTC <input checked="" type="checkbox"/> Computer Advance <input checked="" type="checkbox"/> Miscellaneous payment (Telephone bill, Office Bag, Local Conveyance Bill and Honorarium) 	<p>1. Please share sample of each claim form.</p> <p>2. Please also provide step by step processes from beginning to end for approval of each claim from front-end & back-end user for better understanding.</p>	<p>Forms attached below with this clarification document</p>

27	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 21	7. The proposed IT solution would need facility to capture budget allotment against various accounting heads and for booking of expenditure against the accounting heads in respect of each office. Budget allotment will be entered by administrator for offices from backend.	We understand that template for Capturing Budget allotment has to be developed with Accounting heads as master data which will be managing through super administrator only. Offices can have access to select accounting head and add budget allotment to them. Please confirm. There will be 141 offices in the system, each office will have one administrator access to the system.	Yes, at present one office with five branch offices at delhi cant, merut, allahabad, patna and calcutta will access the system.
28	Section - III: Scope of Work and Deliverables, Phase : Employee Related Claim	Page 21	13. Once, the claim details are entered by the vendors, the concerned field office will certify the claim in the system and immediately payment will be processed by SSC and amount credited directly to the bank account of the vendor	Will Payment will credited to vendor's account through this online system only, i.e. is there any integration with payment mode like PFMS or vendor's details with payment to be released report will be generated and system and processed physically by officials through bank. Please clarify.	Vendor process is not part of scope of work
29	Section - III: Scope of Work and Deliverables, Other key system requirements	Page 21	This activity is first to be developed & implemented in our sub-ordinate office i.e Director General of Audit, Defence Services, New Delhi (DGA, DS, ND) under the supervision of Shri K. S. Subramanian, Director General of that office. He will be the Project Leader of this project and the firm selected will have to interact with both CAG office as well as Defence Audit Office at New Delhi.	Please confirm. We assume the project will be completely offsite (Development and Operation and Maintenance both), where for requirement understanding, meetings and demo assigned Business Analyst/Project manager will visit the client. Kindly confirm. In our understanding is not correct then please specify which type of resources department wants to be onsite and for what duration means in which phase (Requirement, Development, UAT, Warrently support for 1 Year, Operation & Maintenance for 2 Years or throughout the project.)	offsite only
30	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 22	16. Security Audit: The proposed system would be accepted for implementation only after security audit as required by Government of India is completed successfully.	Bidder understanding is Only One security audit will be the part of scope, yearly security audit cost will be bourn by CAG. We will fix security issues/patches with contract period.	Yes.
31	Point 16	Page-22,	The proposed system would be accepted for implementation only after security audit as required by Government of India is completed successfully.	Is the security audit cost included in the scope and cost of application? Please confirm.	Cost to be included in the scope and application development cost.

32	Section - III: Scope of Work and Deliverables, Proposed Strategy for shared services	Page 22	12.Two-factor authentication: As the proposed IT solution involves processing of claims and thus has financial implications, in addition to authentication through use of User ID and password, a second authentication through One Time Password sent to the registered mobile number/email of employees would be needed.	For Two-factor authentication Email/SMS integration will be required, we understand CAG will provide us APIs for Email/SMS integration. Please Reply.	Yes, requires
33	Clause-8	Page 24	During the system design, the SP shall make necessary provisions for administrator/management reports (if any), dashboards for report extraction etc, SMS/email gateway in line with the expectations from web based application provided in the functional requirements (Whether the SP is supposed to develop all these features or to keep the provisions only). APIs/Web-services for 3rd party integration will be Required. It is very important that the website should be able to support all latest common browsers (like Internet explorer, Mozilla, Chrome etc).(mobile compatibility)	Which APIs/Web-Services for 3rd party integration are required i.e. only SMS/E-mail gateway for event based reminders/notifications or some other internal CAG system. Also, this clause is not in sync with clause 20 on page 57/72, which says "no integration is currently envisaged". Please clarify the same.	No API's is required only SMS / email authentication is required

34	Section – III SCOPE OF WORK AND DELIVERABLES	24	<p>3. Project Deliverables (Products) Scope of work.</p> <p>3.1. Project Delivery Stages</p> <p>8) During the system design, the SP shall make necessary provisions for administrator /management reports (if any), dashboards for report extraction etc, SMS/email gateway in line with the expectations from web based application provided in the functional requirements (Whether the SP is supposed to develop all these features or to keep the provisions only). APIs/Web-services for 3rd party integration will be Required. It is very important that the website should be able to support all latest common browsers (like Internet explorer, Mozilla, Chrome etc).(mobile compatibility)</p>	<p>1. We assume that all required 3rd party SMS & Email Gateway APIs will be provided by the CAG / DGA(DS) ND office. Kindly confirm.</p> <p>2. If bidder has to procure SMS gateway then please confirm average how many SMSs / month should bidder consider in their commercial.</p> <p>3. We assume that you required proposed web application (Frontend & Backend) to be mobile responsive. Please confirm.</p>	<p>1. Integration of LDAP is a part of the system</p> <p>2. There are 400 employees</p> <p>3. Responsive</p>
35	Section – III SCOPE OF WORK AND DELIVERABLES	24	Phase II: Development Completion	1. Please share the list and details of new features & functionality which you intend to have in proposed web application.	No new activity / features as explained in the RFP
36	Section – III SCOPE OF WORK AND DELIVERABLES	25	Phase II: Development Completion 7) The SP must ensure that any changes made to database are captured centrally and securely stored, such that the audit trails cannot be manipulated by anyone including super users and DBAs. There should also be facility to send alerts for the suspicious activities or attempts to policy violations.	<p>1. What kind of suspicious activities or attempts you want to track?</p> <p>2. How alerts need to be sent? Email or SMS?</p>	<p>1. As already explained in RFP suspicious activity or attempt to policy violation set for each module.</p> <p>2. Email and SMS</p>
37	Section – III SCOPE OF WORK AND DELIVERABLES	26	2. This includes installation/configuration of required system software, SSL certificate, application software, relevant database, OS etc.	1. We assume that required system software, application software, relevant database and OS will be provided by CAG. Kindly confirm.	Open source software to be used and hardware will be provided.

38	Section – III SCOPE OF WORK AND DELIVERABLES	27	3.6 Roll-out Before roll-out, the vendor will install and configure the respective environment on the production server (external hosting agency) and ensure successful transfer of the web application from the testing environment to production environment where final sign off of the project will be done by DGA(DS) ND office. The vendor will prepare a roll-out and communications plan. Training and roll-out will be managed through central location Delhi only. Initially the system will be run pilot for DGA(DS) ND office further the same can be considered for replication to other offices within IAAD.	<p>1. We assume that roll-out will need to be carried out at single location (New Delhi) only. Kindly confirm.</p> <p>2. If not, then please provide list of locations where rollout is required.</p> <p>3. Please provide scope for Pilot Run?</p> <p>4. We assume that Pilot Run will be done at Single Location (New Delhi) only. Kindly confirm.</p> <p>5. If not, then please provide list of locations where pilot is required.</p>	<p>1. Yes</p> <p>2. NA</p> <p>3. As per RFP</p> <p>4. Yes</p> <p>5. NA</p>
39	Section IV CONDITIONS OF THE CONTRACT	32	18. Taxes and Duties The rates quoted inclusive of taxes and duties shall be in Indian Rupees; also separately mentioning all taxes, duties as applicable up to the completion of job. Any increase in the rates will not be allowed.	<p>1. We assume that GST will be considered as per actual at the time of invoicing and vendor will be paid extra if there is any increment in GST in future. Kindly confirm.</p>	<p>Yes</p>
40	Form 8 - Format for Resumes	Page 42	Form 8 - Format for Resumes	<p>Is there any specific Resumes, department is expecting for other than 4 Key Professional Staff. Please response. Each profile need to submit one resource resume or all resources to be proposed resume have to be submitted. Please response.</p>	<p>The bidder needs to provide CVs of all resource persons actually planned to be deployed exclusively for the proposal.</p>

41	Form 12A- Summary of Costs - Component A	Page 46	One Time 3rd Party Cost (Security Audit + SSL)	We assume Only one time 3rd party project cost that are Security Audit and SSL, would be considered into the part of scope. Over and above will be managed by client, cost for the same will be beared by client during project duration that after go-live to till 1 year warrenty and 2 Years Operation & maintenance. Please confirm. Also please let us know bout SSL duration will it be taken for 3 years in one time or it should be taken for 1 year, further department will purchase SSL. Please Response.	Yes SSL duration would be taken for 1 year.
42	Form 12A- Summary of Costs - Component A	Page 46	One Time 3rd Party Cost (Security Audit + SSL)	Bidder understanding is Security Audit for one time and SSL also for 1 Year cost to be mentioned in this section. Next year onwards CAG will bourn cost for security audit and SSL. Please Reply.	Yes
43	SECTION-VI ANNEXURE-I: SERVICE LEVEL REQUIREMENTS	50	Level-1 Severity Such cases that can be addressed without modifications to the code. E.g.: User not able to browse – a change required in the configuration of the application Agency to resolve such problems within 4 hours from the time of reporting by CAG or DGA (DS) ND	1. Resolution time depends upon the complexity of the problem. Therefore it will be difficult for the bidders to commit 4 hours response time. We therefore request you to keep as 8 hours. Kindly consider. 2. We also assume that you are referring business hours here. Kindly clarify.	1. Clause retained as per RFP 2. Yes
44	SECTION-VI ANNEXURE-I: SERVICE LEVEL REQUIREMENTS	50	Level-2 Severity Such case where there is minor problem in the workflow/navigation of pages such as reports, forms, in the Application etc OR When there is a minor deviation in the application outcome that is not as per feature requirement. Agency to resolve such problems within 1 working day from the date and time of reporting by CAG or DGA (DS) ND	1. Resolution time depends upon the complexity of the problem. Therefore it will be difficult for the bidders to commit 1 day response time. We therefore request you to keep as 2 days. Kindly consider. 2. We also assume that you are referring business days here. Kindly clarify.	1. Clause retained as per RFP 2. Yes

45	SECTION-VI ANNEXURE-I: SERVICE LEVEL REQUIREMENTS	51	NOTE: a) Penalties as mentioned above shall be applicable from the date of start of services. b) Any delay in deploying full resources at the start of service shall attract these penalty clauses. c) In case if CAG calls for replacement of a resource then the agency shall be allowed 7 days time to provide alternate resource. For this period no penalty shall be imposed except pro-rata reduction of that resource. d) In case if CAG does not require a certain resource / all resources for a certain period then no penalty shall be imposed except pro-rata reduction of that resource.	1. As there is no requirement to depute onsite resources (full time) this clause stands irrelative. We therefore request you to delete this clause from the tender document.	Considered. It will be taken care of at the time of drafting Terms and contions.
46	3. HELP DESK - MAINTENANCE WINDOWS	52	3.2. If downtime is expected, then alternate arrangement for continuous service must be made by the Agency.	1. As CAG/DGA(DS) ND office web application will be hosted on NIC Cloud Server we assume that alternet server with similary capacity will be provided by NIC only, in case of downtime is required. Kindly consider.	Provided by NIC/CAG. Will be decided later
47	3. HELP DESK - MAINTENANCE WINDOWS	52	3.5. There shall be one mandatory preventive maintenance by the Agency's maintenance team in every three months, i.e., minimum of twelve visits in three years of warranty and support.	1. We assume that these visits will be limited to New Delhi only. Kindly confirm or provide list of locations to be visited. 2. We assume that only one or two resources need to visit for maintenance work and not the entire team. Kindly confirm.	1. Not required at present. 2. Yes
48	3. HELP DESK - MAINTENANCE WINDOWS	52	3.6. In addition the Agency will also be required to carry out the following activities during the maintenance period: c. Fortnightly full backup of application through the duration of the contract.	1. We assume that required hardware and software for taking backup will be provided by CAG. Kindly confirm.	Hardware will be provided. Since we intend to use open source software. It will have to be arranged by the developer.

49	3. HELP DESK - MAINTENANCE WINDOWS	52	3.6. In addition the Agency will also be required to carry out the following activities during the maintenance period: d. Provide a report on site traffic statistics and search engine analysis reports on a monthly basis.	1. As this is a web based application and used by internal staff only, site traffic statistics and search engine analysis report is not relevant. We therefore request you to remove this clause. Kindly consider.	Yes
50	Annexture III	Page 55	Requirement SI.No.7. LDAP integration has to be there so that internal users will use official email id credentials for login.	We assume that for LDAP integration, client will provide us required APIs with access provision. Please confirm.	SMS and Email gateways will be provided by NIC.
51	Generic		User Training	We assume User Training will be given at Centra Location. Please confirm. Number of attendees for Training with Training duration need to know. Please share. Also we assume Training infra with internet connectivity will be provided by the client. Please confirm.	Yes, at Delhi. 10 selected staff as per clause 3.8 of Section-III of RFP page no.28. Training Infrastrure will be provided by us.
52	Generic		Data Migration	We assume that there will not be any data migration into scope. Please confirm.	Yes
53	Generic		Hosting & Deployment	Hosting and Deployment Infra will be provided by client.	Yes
54	Annexture III		Requirement SI.No.7. LDAP integration has to be there so that internal users will use official email id credentials for login.	Bidder understands, LDAP integration APIs will be provided by CAG. Please reply.	SMS and Email gateways will be provided by NIC.
55	General			Bidder understands, Application will be developed in Single Language i.e. English. Please reply	Yes
56	General			Bidder understands, application development and maintenance will be offsite, team has to interact with CAG on every required step. There should be single point of contact assigned for CAG from Selected bidder side for integration. Please reply, in case any resource onsite requirement then please mention resource profile will period for onsite requirement. Please reply.	Yes, development and maintenace will be Off-site. In case, problem is not resolved only then, vendor has to arrange to resolve it onsite.

57	General			Bidder understands, User Training and UAT will be at central location i.e. New Delhi. Please reply. If not then please specify which all location Visit will be there with specifying number of days, also let us know in that case travelling, fooding & lauding cost will bourn by CAG of Selected Bidder. Please reply.	Yes, User Training and UAT will be at central location i.e. New Delhi.
58	General			Proving Hosting & Deployment Infrastructure will be responsibility of CAG. Please reply	Yes
59	General			Bidder understands, this will be new application development and there is no requirement for data legacy and data migration. Please reply.	Yes
60	General Query			Will organization heads will also be using this application for their claims? Please confirm.	Yes
61	General Query			We assume that there will be no business rules involved in application and all the fields will be open without any validation? Please confirm.	Userworkflow authorisation, validation, and budget control is required.
62	General Query			Will there be any calculations involved in budget allocation through application and claims by employees? Please reply.	The expenditure through contract were allotted budget is necessary
63	General Query			Will there be any checks to be implemented from backend for claim limit of each post/designation or type of claim? Please reply.	The basic rules set for each type of claims or given in each claims format attached will require.
64	General Query			Will there be any requirement of onsite resources. If yes, then what will be the minimum number resources required.	No

65	General Query			We assume that there is no third party integration in the application? Please confirm.	Yes
66	General Query			We assumes that client is open to any technology for development. If any preference, please let us know.	Open Source operations and software
67	General Query			Will there be any other process of salary in the application other than sending document to SSC? Please reply.	No Salary process
68	General Query			We assumes that a single point of contact will be provided by client during requirement and execution phase of project. Please confirm.	Yes, DGADS office & IS Wing
69	General Query			Bidder assumes, after the approval of SRS any change in application will be considered as Change Request which will be of extra cost. Please confirm.	Yes
70	General			Bidder understands, application development and maintenance will be offsite, team has to interact with CAG on every required step. There should be single point of contact assigned for CAG from Selected bidder side for integration. Please reply, in case any resource onsite requirement then please mention resource profile will period for onsite requirement. Please reply.	off site only contract will be signed project manager / leader

जी.ए.आर.-14C
G.A.R.-14C

SOLD BY : AMIR BOOK DEPOT, 4070, NAI SARAK, DELHI-06 ☎ 23918707,

ABD
SINCE 1922

उप-बिल सं./Sub-bill No. _____

अवकाश यात्रा रियायत बिल (L.T.C.)

Leave Travel Concession Bill for the Block of कुल वर्ष Year 20..... के लिए
टिप्पणी—इस बिल को दो प्रतियों में, एक भुगतान के लिए दूसरी कार्यालय के प्रति के रूप में, तैयार किया जाना चाहिए।

NOTE—This bill should be prepared in duplicate—one for payment and the others as office copy

भाग क (सरकारी सेवक द्वारा भरा जाना है) PART-A (To be filled up by Government Servant)

1. नाम/Name
2. पदनाम/Designation 3. वेतन/Pay
4. मुख्यालय/Headquarters
5. स्वीकृत अवकाश का प्रकार व अवधि
Nature & Period of leave sanctioned From..... To
6. अवकाश यात्रा—छूट दावा जिन परिवार—सदस्यों के विषय में है उनका विवरण:
Particulars of members of family in respect of whom the LTC has been claimed.:-

क्रम सं S. No	नाम Name	उम्र Age	सरकारी कर्मचारी से संबंध Relationship with Govt. Servant

7. सरकारी कर्मचारी और उसके परिवार के सदस्य द्वारा की गई यात्रा/यात्राओं के ब्यौरे:

Details of journey(s) performed by Government servant and the member of his/her family:

प्रस्थान / Departure		आगमन/Arrival		दूरी	यात्रा की रीति और प्रयुक्त	भाड़ों की	संदत यात्री भाड़ा
तारीख और समय	से	तारीख और समय	तक	किलोमीटर में	स्थान व सुविधा का वर्ग	संख्या	Fare Paid
Date and Time	From	Date and Time	To	Distance in Kilometers	Mode of travel and class of accomodation used	No. of fares	रू./Rs. पै./P.
1	2	3	4	5	6	7	8

8. अग्रिम की रकम, यदि है तो/Amount of advance, if any drawn Rs.

9. यात्रा की विशिष्टियां, जिसके लिए सरकारी सेवक ने उस निवास-वर्ग से, जिसका वह हकदार है --से उच्चतर वर्ग की सुविधा का उपयोग किया हो। (स्वीकृति संख्या व तिथि दी जाए):-

Particulars of journey (s) for which higher class of accommodation than the one to which the Government servant is entitled was used. (Sanction No. and Date to be given):-

स्थान Place		वाहन का प्रकार Mode of Conveyance	वह वर्ग जिसका हकदार है Class to which entitled	वह वर्ग जिसमें वास्तविक रूप से यात्रा की है Class to which actually travelled	भाड़ों की संख्या No. of Fares	प्रदत्त भाड़ा Fare Paid रु./Rs. पं./P.
से From 1	तक To 2					

10. रेल से जुड़े स्थानों के बीच सड़क से की गई यात्रा/यात्राओं के ब्यौरे:-

Details of journey (s) performed by road between places connected by rail

स्थानों के नाम/Name of Places		वह वर्ग जिसका हकदार है Class to which entitled	रेल भाड़ा/Rail Fare रु./Rs. पं./P.
से From 1	तक To 2		

प्रमाणित किया जाता है कि Certified that the ::

1. उपर्युक्त जानकारी मेरे सर्वोत्तम ज्ञान और विश्वास के अनुसार सही है।

Information as given above, is true, the best of my knowledge and belief.

2. कि मेरे/मेरी पति/पत्नि सरकारी सेवा में नहीं हैं/कि मेरे/मेरी पति/पत्नि सरकारी सेवा में हैं और उन्होंने अपने लिए अथवा परिवार के किसी भी सदस्य के द्वारा सम्बन्धित That my husband/wife is not employed in Govt. service/that my husband/wife is employed in Govt. service and the concession has not been availed of by him/her separately of himself/herself or any of the family member for the concerned block of कुल-वर्ष years में अलग से छूट नहीं ली गई है।



तारीख/Date

सरकारी सेवक के हस्ताक्षर/Signature of the Govt. Servant



भाग-ख (बिल अनुभाग में भरा जाना है।)

PART-B (To be filled in the Bill Section)

1. छूट मद्दे शुद्ध हकदारी रु० बनी जिसके ब्योरे नीचे दिए गए हैं।
The net entitelment on account of Leave Travel Concession works out to रु. Rs.
as detailed below :-

(क) रेल/वायुयान/बस/स्टीमर भाड़ा
(a) Railway/air/bus/steamer fare Rs. रु. Rs.

(ख) घटाएँ ली गई अग्रिम की रकम, द्वारा वाउचर
सं. तारीख

(b) Less amount of advance drawn vide voucher
No. Dated रु. Rs.

शेष राशि/Net amount रु. Rs.

(2) व्यय में विश्वसनीय है।
(2) The expenditure is debitable to

बिल लिपिक के आद्यक्षर
Initials of Bill Clerk

आदान और सँवितरक अधिकारी के हस्ताक्षर
Signature of Drawing & Disbursing Officer

प्रतिहस्ताक्षरित Countersigned
नियंत्रक अधिकारी के हस्ताक्षर Signature of Controlling Officer

प्रमाणित किया जाता है कि सेवा-पुस्तिका में आवश्यक प्रविष्टियाँ कर दी गई हैं

श्री/श्रीमति/कुमारी की

Certified that the necessary entries have been made in the Service Book of

Shri/Shrimati/Miss

सेवा पुस्तिका की प्रविष्टियों को सत्यापित कर सकने वाले नियमित अधिकारी के हस्ताक्षर
Signature of the Officer authorised to attest entries in the Service Book



L.T.C. CERTIFICATE

CERTIFICATE TO BE GIVEN BY THE CONTROLLING OFFICER

- (i) Certified that Sh./Smt./Ms. (Name of the Govt. servant) has rendered continuous service for one year or more on the date of commencing the outward journey.
- (ii) Certified that necessary entries as required under Para 3 of the Ministry of Home Affairs O.M. No. 43/1/55-Ests.(A) part II, dated 11th October, 1956 have been made in the Service Book of Sh./Smt./Ms.

Signature & Designation of the Controlling Officer

CERTIFICATE TO BE GIVEN BY THE GOVERNMENT SERVANT

1. I have not submitted any other claim so far for Leave Travel Concession in respect of myself or my family members in respect of block of two years 20..... and 20.....
2. I have already drawn T.A. for the Leave Travel Concession in respect of a journey performed by me/ my wife with children.
3. I have not already drawn T.A. for the Leave Travel Concession in respect of a journey performed by me/my wife with children/myfamily members in respect of block of two years 20..... and 20.....
4. I have already drawn T.A. for the Leave Travel Concession in respect of a journey performed by me in the year in respect of block of two years 20..... and 20.....
This claim is in respect of a journey performed by me in the years This is against the concession admissible once every year in a prescribed block for visiting home town as all the members of my family are living away from place of work.
5. This journey has been performed by me with my wife with children/my family members to the declared home town viz.
6. That my husband/wife is not employed in the Government.
That my husband/wife is employed in the Government service and the concession has not been availed of by him/her separately for himself/herself or for any of the family members for the concerned block of two years.
7. Certified that my wife/husband for whom L.T.C. is claimed by me is employed in
..... (Name of the Public Sector Undertaking/Corporation/Autonomous body etc.) which provides Leave Travel Concession facilities but he/she has nor preferred and will not prefer any claim in this behalf to his/her employer.
8. Certified that my wife/husband for whom L.T.C. is claimed by me is not employed in any Public Sector Undertaking/Corporation/Autonomous body etc., financed wholly or partly by the Central Government or Local Body which provides L.T.C. facilities to its employees and their families.

Signature of the Govt. servant

CENTRAL GOVERNMENT HEALTH SCHEME
MEDICAL REIMBURSEMENT CLAIM FORM
(To be filled up by the Principal Card holder in BLOCK LETIERS)

1. (a) Name of the Principal CGHS Card Holder & Designation : _____
- (b) CGHS Ben ID No. : _____
- (c) Employee Code No. : _____
- (d) Ward Entitlement -Pvt./Semi-Pvt./General : _____
Basic Pay (excluding Grade Pay) : _____
- (e) Full Address : _____
- (f) Mobile telephone No. and e-mail address, if any: _____

2. (a) Patient's Name : _____
- (b) Patient's CGHS Ben ID No. : _____
- (c) Relationship with the Principal CGHS card holder : _____

3. Name & address of the hospital/ diagnostic centre / imaging centre where treatment is taken or tests done: _____

4. Whether the hospital/diagnostic imaging centre is empanelled under CGHS : _____

5. Treatment for which reimbursement claimed : _____
(a) OPO Treatment /Test & investigations
- (b) Indoor Treatment

6. Whether treatment was taken in emergency : _____

7. Whether prior permission was taken for the treatment: _____

8. Whether subscribing to any health/medical insurance scheme, If yes, amount claimed/received : _____

9. Details of Medical Advance taken, if any : _____

10. Total amount claimed
(a) OPO Treatment
- (b) Indoor Treatment
- (c) Tests/Investigation

11. Name of the Bank: _____ SB A/C No.: _____
Branch MICR Code _____ IFSC Code _____

DECLARATION

I hereby declare that the statements made in the application are true to the best of my knowledge and belief and the person for whom medical expenses were incurred is wholly dependent on me. I am a CGHS beneficiary and the CGHS card was valid at the time of treatment. I agree for the reimbursement as is admissible under the rules.

Date: _____

Place: _____

Signature of the Principal CGHS card holder

Documents to be attached

- 1 Photo copy of the CGHS card of the employee along with the patient's CGHS Card.
- 2 Copy of permission letter, if any.
- 3 Emergency certificate (original), in case of emergency.
- 4 Copy of the discharge summary.
- 5 Ambulance Certificate (original), if any.
- 6 Original bills /cash memo / vouchers etc. for the reimbursement amount claimed.

IMPORTANT

Kindly ensure to provide the following information / documents, wherever applicable:

- a) Obtain Break up of Investigations from the hospital/diagnostic center/imaging center (details and rates of individual tests and the exact number of tests, X-ray films, etc.,) as the reimbursable amount is calculated as per approved CGHS rates per test.
- b) In case of loss of original papers, Affidavits as per Annexure I to be submitted. All photocopies of the bills to be attested by the treating doctor/specialist.
- c) In case of death of the card holder, Affidavit as per Annexure II to be filled and attached to claim reimbursement.
- d) In case of implants, Invoice No. along with sticker with serial number of the implant to be attached.
- e) In case of Coronary Stents, outer pouch of stents is to be enclosed.
- f) In case of replacement of pacemaker / ICD etc., copy of the warranty certificate of earlier pacemaker/ICD may be enclosed.

Note: Misuse of CGHS facilities is a criminal offence. Penal action including cancellation of CGHS card may be taken in case of wilful suppression of facts or submission of false statements. Suitable disciplinary action shall be taken in case of serving employees.

PROFORMA FOR APPLICATION FOR WITHDRAWAL FROM PROVIDENT FUND

Director General of Audit
Defence services New Delhi

- Application for withdrawal from _____ :
1. Name of the subscriber _____ :
 2. Account Number _____ :
 3. Designation (with Departmental Suffix) _____ :
 4. Pay _____ :
 5. Date of joining service and Date of superannuation _____ :
 6. Balance at credit of the subscriber on The date of application as below _____ :
 7. Closing balance as per statement for the year _____ :
 - (ii) Credit from _____ to _____ on account monthly subscription _____ :
 - (iii) Refunds made to the Fund after the Closing balance vide (i) above _____ :
 - (iv) Withdrawal during the period from _____ to _____ :
 - (v) Net balance at credit on date of Application _____ :
 8. Amount of withdrawal required _____ :
 9. (a) Purpose for which the withdrawal is Required _____ :
(b) Rule under which the request is Covered _____ :
 10. Whether any withdrawal was taken for the same purpose earlier. If so, indicate the amount and the year. _____ :
 11. Name of the Accounts Officer maintaining the Provident Fund Account _____ :

(Signature of Applicant)

Dated :

Name
Designation
Section

Application for advance from G.P. Fund

DIRECTOR GENERAL OF AUDIT,
DEFENCE SERVICES, L-II BLOCK, BRASSEY AVENUE
NEW DELHI - 110001.

1. Name of the Subscriber :
2. Account No. :
3. Designation :
4. Pay :
5. Balance at credit of the subscriber on the date of application as below:-
 - (i) Closing balance as per the statement for the year.....
 - (ii) Credit from March.....to..... on account of monthly subscription.
 - (iii) Refunds from March.....to.....
 - (iv) Withdrawals during the period from April.....to 31st March.....
 - (v) Net balance at credit :
6. Amount of advance outstanding, if any, and the purpose for which advance was taken.
Amount of advance taken. Balance outstanding as on date.....
7. Amount of advance required
8. (a) Purpose for which the advance is required.
(b) Rules under which the request is covered:
(c) If advance is sought for House Building, etc., following information may be given:-
 - (i) Location and measurement of the plot
 - (ii) Whether plot is freehold or on lease :
 - (iii) plan for construction :
 - (iv) If the flat of plot being purchased is from a H.B. Society, the name of the Society, the location and measurement :

v.) Cost of construction

vi) If the purchase of flat is from DDA or any Housing Board, etc. the location dimension etc., may be given.

(d) If advance is required for education of children, following details may be given :-

(i) Name of the Son/Daughter :

ii) Class and Institution/College where studying :

iii) Whether a day-scholar or a hostler :

(e) If advance is required for treatment of ailing family members, following details may be given.

i) Name of the patient and relationship :

(ii) Name of the Hospital/Dispensary/Doctor where the patient is undergoing treatment

(iii) Whether outdoor/indoor patient :

(iv) Whether reimbursement available or not :

Note:- In case of advance under 8(c) to 8(c), no certificate or documentary evidence would be required.

9. Amount of the consolidated advance (Items 6 & 7) and number of monthly instalments in which the consolidated advance is proposed to be repaid :

10. Full particulars of the pecuniary circumstances of the subscriber, justifying the application for advance. ;

I certify that particulars given above are correct and complete to the best of my knowledge and belief and that nothing has been concealed by me.

Dated:.....

Signature of applicant

Name

Designation

Section

Government of India
Ministry of _____
Department of _____

[Statement to be furnished on half-yearly basis by the Government Officer to Administration]

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 :

- i) Jan-June, 20__
OR
ii) July-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:

LTC Adv.

Application Form for Grant of LTC Advance

1. Name of the Government Servant
2. Designation
3. Date of entering the Central Government Service
4. Present pay + NPA + SI/
5. Whether permanent or temporary
6. Home town as recorded in the Service Book
7. Whether wife/husband is employed and if so whether entitled to LTC
8. Whether the concession is to be availed for visiting Home Town, and if so block for which LTC is to be availed
9. (a) If the concession is to visit "anywhere in India", the place to be visited.
(b) Block for which to be availed.
10. Single rail fare/bus fare from the headquarters to home town/place of visit by shortest route
11. Persons in respect of whom LTC is proposed to be availed

Sl. No.	Name and age	Relationship

12. Amount of advance required Rs. (Rupees)

I declare that the particulars furnished above are true and correct to the best of my knowledge. I undertake to produce the tickets for the outward journey within ten days of receipt of the advance.

In the event of cancellation of the journey or if I fail to produce the tickets within ten days of receipt of advance, I undertake to refund the entire advance in one lumpsum.

Date 10 days leave encashment Payment

i) EL at credit =

Total EL used in LTC =
(including 10 days leave encashment)

Signature

iii) Balance > 30 days (EL)

Proforma for self-certification by the Government employee

I Sh./Smt./Kr. (Name of the Govt. servant) wish to confirm that I am availing (Home Town/ Any Place in India) LTC in respect of self/ family member(s) for the block year to visit (Place of visit) during (dates of journey). It is stated that I or the family member for whom I wish to avail LTC has/have not availed of the same before in the present block.

2. Particulars of members of family in respect of whom the Leave Travel Concession is being claimed are as under:

SI. No.	Name(s)	Age	Relationship with the Govt. servant

3. It is certified that the above facts are true and any false statement shall make me liable for appropriate action under Rule 16 of CCS(LTC) Rules, 1988 and the relevant disciplinary rules.

* N.B.: Government employee may share interesting insights and pictures, if any, of the destination visited while availing LTC on an appropriate forum.

**FORM OF APPLICATIONS FOR MEDICAL CLAIMS
MED.97**

Form of application for claiming refund of medical expenses incurred in connection with medical attendance and/or treatment for Central Government servants and their families - for medical attendance/treatment taken both from the Authorised Medical Attendant and a Hospital

1.	Name and designation of Government servant (in block letters)	:
	i) Whether married or unmarried :	:
	ii) If married, the place where wife/husband is Employed	:
2.	Office in which employed	:
3.	Pay of the Government servant as defined in the Fundamental Rules, and any other emoluments which should be shown separately	:
4.	Place of duty	:
5.	Actual residential address	:
6.	Name of the patient and his/her relationship to the Government servant. N.B. - In the case of children state age also	:
7.	Place at which the patient fell ill	:
8.	Details of the amount claimed	:
I. Medical Attendance -		
i) Fees for consultation indicating -		
a)	The name and designation of the Medical Officer consulted and the hospital or dispensary to which attached	:
b)	The number and dates of consultation and the fee paid for each consultation.	:
c)	The number and dates of injection and the fee paid for each injection.	:
d)	Whether consultations and/or injections were had at the hospital, at the consulting room of the medical officer or at the residence of the patient.	:
ii) Charges for pathological, bacteriological, radiological, or other similar tests undertaken during diagnosis indicating-		
a)	The name of the hospital or laboratory where undertaken; and	:
b)	Whether the tests were undertaken on the advice of the authorized medical attendant. If so, a certificate to that effect should be attached.	:
iii) Cost of medicines purchased from the market (Cash memos and the essentiality certificate should be attached).		
II Hospital Treatment.		
Name of the hospital		
Charges for hospital treatment, indicating separately the charges for -		
i)	Accommodation (State whether it was according to the status or pay of the Government servant and in cases where the accommodation is higher than the status of the Government servant, a certificate should be attached to the effect that the accommodation to which he was entitled was not available)	:
ii)	Diet	:
iii)	Surgical operation or medical treatment or confinement.	:
iv)	Pathological, bacteriological, radiological or other similar tests indicating -	:
a)	The name of the hospital or laboratory at which undertaken, and	:
b)	Whether undertaken on the advice of the medical officer in charge of the case at the hospital. If so, a certificate to that effect should be attached.	:
v)	Medicines.	:
vi)	Special medicines (Cash memos and the essentiality certificates should be attached)	:
vii)	Ordinary nursing	:
viii)	Special nursing, i.e., nurses, specially engaged for the patient. State whether they are employed on the advice of the medical officer in charge of the case at the hospital or at the request of the Govt. Servant or patient. In the former case a certificate from the medical officer in charge of the case and countersigned by the Medical Superintendent of the hospital should be attached.	:
ix)	Ambulance charges (State the journey - to and from- undertaken)	:
NOTE 1. - If the treatment was received by the Govt. servant at his residence under Rule 7 of the C.S. (M.A) Rules, 1944 give particulars of such treatment and attached a certificate from the authorized medical attendant as required by these rules.		
NOTE 2. - If the treatment was received at a hospital other than a Govt. hospital, necessary details and the		

certificate of the authorized medical attendant that the requisite treatment was not available in the nearest Govt. hospital should be furnished.

III. Consultation with Specialist - Fees paid to a specialist or a Medical Officer other than the authorized medical attendant, indicating - a) The name and designation of the Specialist or Medical Officer consulted and the hospital to which attached. b) Number and dates of consultations and the fees charged for each consultation. c) wherever consultation was had at the hospital, at the consulting room of the Specialist or Medical Officer, or at the residence of the patient, and d) Whether the Specialist or Medical Officer was consulted on the advice of the authorized medical attendant and the prior approval of the Chief Administrative Medical Officer of the State was obtained. If so, a certificate to that effect should be attached.		:
9.	Total amount claimed	:
10.	Less advance taken on	:
11.	List of enclosure	:

DECLARATION TO BE SIGNED BY THE GOVERNMENT SERVANT
 I hereby declare that the statement in the application are true to the best of my knowledge and belief and that the person for whom medical expenses were incurred is wholly dependent upon me.

Dated.....

Signature of the Government servant
 and Office to which attached.

जी. ए. आर. - 14A (नियम 66 (1) व 90 (1) (i)) देखिए।

G.A.R. -14-A [See Rules 66 (1) & 90 (1) (i)]

उप बिल सं /Sub-bill No.....



दौरे के लिए यात्रा भत्ता बिल

TRAVELLING ALLOWANCE BILL FOR TOUR

टिप्पणी-इस बिल को दो प्रतियों में, एक सवाल के लिए दूसरी कार्यालय के प्रति के रूप में, तैयार किया जाना चाहिए।

NOTE : This bill should be prepared in duplicate-one for payment and the others as office copy.
भाग क (सरकारी सेवक द्वारा भरा जाना है) **PART-A (To be filled up by Government servant)**

1. नाम/Name.....
2. पदनाम/Designation.....
3. वेतन/ Pay.....
4. मुख्यालय/Headquarters.....
5. की गई यात्रा/यात्राओं के ब्यौरे और प्रयोजन/Details and purpose of journey (s) performed.

प्रस्थान/ Departure		आगमन/Arrival		यात्रा की रीति और स्थान सुविधा का वर्ग Mode of travel and class of accomodation	संदत यात्री भाड़ा Fare Paid रु. Rs.	सड़क माल भत्ता के लिए दूरी कि. मी. में Distance in Kms. for road Mileage	विश्राम की अवधि Duration of Halt		यात्रा का प्रयोजन Purpose of Journey
तारीख और समय Date and Time	से From	तारीख और समय Date and Time	तक To				दिन Days	घण्टे Hrs.	
1.	2.	3.	4.	5.	6.	7.	8.	9.	

6. यात्रा की रीति/Mode of journey :-

(i) वायुयान/ Air

(क) कार्यालय द्वारा व्यवस्थाकृत विनिमय वाउचर

(a) Exchange voucher arranged by office

हाँ/नहीं

(ख)द्वारा व्यवस्थाकृत/टिकट/विनिमय वाउचर

Yes/No.

(b) Ticket/Exchange voucher arranged by.....

(ii) रेल/Rail

(क) क्या यात्रा मेल/एक्सप्रेस/सामान्य गाड़ी से की गई?

Whether travelled by Mail/Express/Ordinary train?

हाँ/नहीं

(ख) क्या वापसी टिकट उपलब्ध था ?

Yes/No.

Whether return ticket was available ?

(ग) यदि उपलब्ध था तो क्या वापसी टिकट खरीदा गया? यदि नहीं तो कारण बताएँ।

If available, whether return ticket purchased? If not, state reasons.

(iii) सड़क / Road

उपयोग में लाए गए वाहन का प्रकार, अर्थात सरकारी परिवहन द्वारा/टैक्सी द्वारा, किसी बस या अन्य लोक वाहन में एक सीट लेकर/किसी अन्य सरकारी सेवक के साथ मिलकर गाड़ी में उसी की या किसी अन्य व्यक्ति की, यह विनिर्दिष्ट किया जाए।

Mode of conveyance used i.e. by Govt. transport/by taking a taxi, single seat in a bus or other public conveyance/by sharing with another Govt. servant in car belonging to him or to a third person, to be mentioned.

7. विराम स्थल से निम्नलिखित कारण से अनुपस्थित रहने की तारीख :- Dates of absent from place of halt on account of :-

(क) आर. एच. व सी. एल./R. H. and C.L.

(ख) रविवार और अवकाश दिनों को प्रस्तुत: शिविर में न रहना

(b) Not being actually in camp on Sunday and holidays.

8. वे तारीखें जिनको राज्य या राज्य निधि से वित्त परेक्षित किसी संगठन द्वारा मुफ्त भोजन और/ या आवास उपलब्ध किया गया :-

Dates on which free board and/or lodging provided by the State or any organisation financed by State funds :-

(क) केवल भोजन /Board only

(ख) केवल आवास /Lodging only

(ग) भोजन और आवास /Board and lodging

9. ऐसे मामलों में जिनमें होटलों/अनुसूचित टैरिफ पर रूकना और /तो मास या जमा करने वाले अन्य स्थापकों में ठहरने के लिए उच्चतर दर पर दैनिक भत्ता का दावा किया जाता है, होटल रसीद आदि के साथ प्रस्तुत की जाने वाली विशिष्टियाँ-

Particulars to be furnished alongwith hotel receipt etc. in cases where higher rate of D.A. is claimed for stay in hotel other establishments providing board and/or lodging at scheduled tariffs-

ठहरने की अवधि / Period of Stay		होटल का नाम Name of the Hotel	ठहरने की दैनिक दर Daily rate of Lodging charged	कुल संदत्त रकम Total Amount paid
से From	तक To			

10. जब यात्रा की विशिष्टियाँ, जिसके लिए सरकारी सेवक ने उस वर्ग से जिसका वह हकदार है, उच्चतर वर्ग की सुविधा का उपयोग किया है :-

Particulars of journey(s) for which higher class of accommodation than the one to which the Government servant is entitled was used :-

तिथि Date	ठहरने की अवधि व स्थान Period of Stay & Places		वाहन का प्रकार जिसका उपयोग किया गया है Mode of conveyance used	वह वर्ग जिसका हकदार है Class to which entitled	वह वर्ग जिसमें यात्रा की है Class to which travelled	उस वर्ग का यात्री भाड़ा जिसका हकदार है Fare of the entitled class/Rs.
	से From	तक To				
1.	2.	3.	4.	5.	6.	7.

यदि उच्चतर वर्ग की स्थान सुविधा की गई यात्रा/यात्रायें समय प्राधिकारी के अनुमोदन से की गई हैं जो मंजूरी की सं. और तारीख उद्धृत करें।

If the journey(s) by higher class accommodation has been performed with the approval of the competent authority. No. and date of sanction may be quoted.

11. रेल से जुड़े स्थानों के बीच सड़क से की गई यात्रा/ यात्राओं के ब्यौरे :-
Details of journey (s) performed by road between places connected by rail :-

तिथि Date 1.	स्थानों के नाम/ Name of places		संदत्त भाड़ा / Fare paid रु/ Rs. 4. पै./P.
	से From 2.	तक To 3.	

12. लिए गए यात्रा भत्ता अग्रिम की रकम, यदि कोई हो।
Amount of T.A. advance. If any, drawn.
प्रमाणित किया जाता है कि उपरोक्त जानकारी मेरे सर्वोत्तम ज्ञान और विश्वास के अनुसार सही है।
Certified that the information as given above, is true, the best of my knowledge and belief.

तारीख / Date सरकारी सेवक के हस्ताक्षर/Signature of the Govt. servant

भाग-ख (बिल अनुभाग में भरा जाना है) PART-B (To be filled in the Bill Section)

- 1.. भत्ते मद्धे शुद्ध हकदारी The net entitelment on account of travelling allowance works out to Rs.
रु. बनी जिसके ब्यौरे नीचे दिए गए हैं as detailed below :-

(क) रेल/वायुयान/बस/स्टीमर यात्री भाड़ा Railway/air/bus/steamer fare Rs. रु.

(ख) Road mileage forKms कि. मी. के लिए सड़क मील भत्ता @Rs. रु. प्रति कि. मी. की दर से P/Km.

(ग) दैनिक भत्ता/ Daily allowance

(i) दिन/ Days @ Rs. रु. प्रति दिन की दर से/ Per Day.....

(ii) दिन/ Days @ Rs. रु. प्रति दिन की दर से/ Per Day.....

(iii) दिन/ Days @ Rs. रु. प्रति दिन की दर से/ Per Day.....

(घ) वास्तविक व्यय/ Actual expenses Rs. रु.

कुल राशि/ Gross Amount Rs. रु.

(ङ) Less amount of T.A. advance. If any, drawn vide voucher No.

वाउचर सं. तारीख Dated..... Rs. रु.

के अनुसार लिए गए यात्रा भत्ता सहित की रकम को यदि कोई हो तो घटा दें।

निबल राशि/Net amount.....Rs. रु.

2. व्यय The expenditure is debitable to.....में विकलनीय है।

बिल लिपिक के आद्याक्षर

Initials of Bill Clerk

आदान और संवितरण अधिकारी के हस्ताक्षर
Signature of Drawing & Disbursing Officer



प्रतिहस्ताक्षरित Countersigned

नियंत्रक अधिकारी के हस्ताक्षर Signature of Controlling Officer



CERTIFICATE FOR TOUR T.A. BILLS

1. Certified that I/my family was neither allowed free transit by Rail under free pass or otherwise provided with means of communication at expense of the state or local round journey for the which T.A. has been claimed in this bill.
2. Certified that I/my family actually travelled by the class for the T.A. claimed in this bill.
3. Certified that number of kilometers shown in this bill is in accordance with the poly metenal tables of the establishment.
4. Certified that journey on.....was performed by Mail/Express train in the interest of public service.
5. Certified that I was actually not merely contrusively in camp on Sundays and holidays for which daily allowance is claimed.
6. Certified that I was not absent on casual leave during the period for which daily allowance has been claimed.
7. Certified that during my halt at..... from..... to..... while on inspection duty continue to be in our expenditure after the first 10 days.
8. Certified that I did not perform the road journey for which the kilometer allowance has been claimed at the higher rates prescribed in Rule 46 of the supplementary Rule by taking a single sent in a taxi motor or mini bus or lorry plying for hire.
9. Certified that I incurred running expenses on a car in this journey.
10. Certified that the road journeys for which kilometer has been claimed at the higher prescribed in supplementary Rule 46 were performed in my own car.
11. Certified that the road journeys for which mileage is claimed were performed by road but were charged by rail. The number of kilometers actually travelled by road being
12. Certified that the family members for whom T.A. has been claimed actually travelled with me or followed me on transfer.
13. Certified that actual expenses incurred as cost of transportation of personal was not less than the sum claimed in the bill.
14. Certified that I have transported.....Kg.....gms. of luggage on my transfer from..... to.....

Countersigned

Signature of the claimant

(Signature & designation of the controlling officer)

स्थानांतरण के लिए यात्रा भत्ता बिल

TRAVELLING ALLOWANCE BILL FOR TRANSFER

टिप्पणी- बिल दो प्रतियों में एक संदाय के लिए गैर दूसरी कार्यालय के रूप में तैयार किया जाना चाहिए
Note:- This bill should be prepared in duplicate one for payment and the other as office copy.

(भाग-क) (सरकारी सेवक द्वारा भरा जाएगा)
Part-A (To be filled by the Govt. Servant)

- नाम/Name
- पदनाम/Designation
- स्थानांतरण के समय वेतन
Pay at the time of transfer
- मुख्यालय/Head-quarter
(a) पुराना/Old
(b) नया/New
- आवासीय पता
Residential Address
(a) पुराना/Old
(b) नया/New

- स्थानांतरण की तारीख को कुटुम्ब के सदस्यों की विशिष्टियाँ (देखिए न.न. 2(8))
Particulars of the members of the family as on the date of transfer (vide S.R. 2(8))

क्रम सं. Sl. No.	नाम Name	आयु Age	सरकारी सेवक से संबंध Relationship with the Government Servant
1.			
2.			
3.			
4.			
5.			
6.			

- सरकारी सेवक और साथ ही उसके कुटुम्ब के सदस्यों द्वारा की गई यात्रा (यात्राओं) के व्योरे
Details of journey(s) performed by Government servant as well as members of his/her family

प्रस्थान Departure		आगमन Arrival		यात्रा के प्रकार और उपयोग की गई श्रेणी Mode of travel and Class of accommodation used	भाड़ों की संख्या No. of fares	संदत भाड़ा Fare Paid	सड़क मार्ग से कि.मी. में दूरी Distance in Km by Road
तारीख एवं समय Date and Time	से From	तारीख एवं समय Date and Time	तक To				
1	2	3	4	5	6	7	8

8. व्यक्तिगत चीज वस्तु के परिवहन प्रभार (धन रसीदें संलग्न करें)

Transportation charges of personal effects (Money receipt to be attached)

तारीख Date	प्रकार Mode	स्थान Station		भार कि.ग्रा. में Weight in Kgs.	दर Rate	राशि Amount	टिप्पणियाँ Remarks
		से From	तक To				

कुल/Total _____

9. व्यक्तिगत वाहन के परिवहन प्रभार (धन रसीदें संलग्न करें)

Transportation charges of personal conveyance: (Money receipt to be attached):

(क) परिवहन का प्रकार और वह स्थान जिस तक परिवहन किया गया

(a) Mode of transport and Station to which transported

(ख) राशि

(b) Amount :

10. ली गई अग्रिम की राशि, यदि कोई है।

Amount of Advance if any, drawn.

11. उस/उन यात्रा/यात्राओं की विशिष्टियाँ जिनके लिए सरकारी सेवक ने उस श्रेणी से जिसका वह हकदार है उच्चतर श्रेणी की पास सुविधा का उपयोग किया है।

Particulars of journey(s) for which higher class of accommodation than the one to which the Government servant is entitled was used.

तारीख Date	स्थानों का नाम Name of Places		वाहन का प्रकार जिसका उपयोग किया गया है Mode of conveyance used	वह श्रेणी जिसके लिए हकदार है Class to which entitled	उस श्रेणी जिससे यात्रा की है Class to which travelled	उस श्रेणी का यात्रा जिसका वह हकदार है Fare entitled Rs. P	
	से From	तक To					

यदि उच्चतर श्रेणी की पास सुविधा में की गई यात्रा/यात्राएं सक्षम प्राधिकारी के अनुमोदन से की गई है तो मंजूरी और तारीख लिखें

If the journey by higher class of accommodation has been performed with the approval of the competent authority. No and date of the sanction may be quoted.

12. रेल से जुड़े स्थानों के बीच सड़क से की गई यात्रा/यात्राओं के ब्यौरे।

Details of journey(s) performed by road between places connected by rail.

तारीख Date	स्थानों का नाम Names of Places		रुपये Rupees	पैसे Paise
	से From	से From		

प्रमाणित किया जाता है कि उपरोक्त जानकारी मेरे सर्वोत्तम ज्ञान और विश्वास के अनुसार सत्य है।

Certified that the information, as gives above is true to the best of my knowledge and belief.

तारीख/Date

सरकारी सेवक के हस्ताक्षर
Signature of the Government servant

भाग ख (बिल अनुभाग द्वारा भरा जाएगा)
PART B (To be filled in the Bill Section)

यात्रा भत्ते मर्दें शुद्ध हकदारीरु० बनती है जिसके ब्यौरे नीचे दिए गए हैं ।
The net entitlement on account of travelling allowance works out to Rs.....as detailed below :-

- (क) रेल/वायुयान/बस/स्टीमर यात्री भाड़ा
Railways/air/bus/steamer fare Rs.....P.
- (ख)किमी० के @ लिए सड़क मील भत्ता रु० पै० (प्रति) किमी० की दर से
Road mileage for.....Kms @ RS.....P.K.m.
- (ग) स्थानांतरण अनुदान
Transfer Grants
- (घ) स्थानांतरण आनुवांशिक.....दिन @ के लिए (महंगाई भत्ता)..... रु० प्रति दिन के दर से
Transfer indicentials (DA for.....day @ Rs..... per day)
- (ङ) व्यक्तिगत चीज-वस्तु का परिवहन.....
Transportation of personal effects
- (च) प्राइवेट वाहन का परिवहन
Transportation of private conveyance
- कुल राशि/Gross amount.....

(छ) लिए गए अग्रिम राशि यदि कोई हो, घटा दें ।
Less amount of advance(s) if any, drawn vide

वाउचर सं./Voucher(s) No.....
तारीख/Date.....

शुद्ध रकम
NET AMOUNT

2. व्यय..... में विकलनीय है ।
The Expenditure is debitible to

आहरण और संवितरक अधिकारी के हस्ताक्षर
Signature of Drawing and disbursing Officer

लिपिक के आद्यक्षर
Initials of Bill Clerk

प्रतिहस्ताक्षरित
Countersigned
नियंत्रक अधिकारी के हस्ताक्षर
Signature of Controlling Officer

COPIES
NO. 100

**PROFORMA FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE/HOSTEL
SUBSIDY IN TERMS OF RBE No. 147/2017**

CLAIM FOR THE FINANCIAL YEAR: -

I hereby apply for the reimbursement of Children Education Allowance for my child/children and relevant particulars are furnished below:-

1.	Name of the Employee	:	
2.	P.F. No./Employee No.	:	
3.	Designation	:	
4.	Office & Bill Unit No.	:	
5.	Name of Spouse	:	
6.	If spouse is employed, State whether in Central Govt., PSU, State Govt. (give details)	:	
7.	Designation, Office & B.U. No. of spouse , if spouse is employed in Railway:		

8. Details of all the children of the employee:

Sl. No.	Sequence	Name	DOB	Age
1.	1 st Child			
2.	2 nd Child			
3.	3 rd Child			

9. Details of all the children for whom CEA/Hostel Subsidy claimed:

Sl. No.	Sequence	Name	DOB	Age
1.				
2.				

10. Academic year, Name of School/Residential School and Class in which children studied:

1 st Child	2 nd Child

11. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed)....
12. Amount of CEA/Hostel Subsidy already received up to previous quarter: ___...
13. The Academic year for which CEA /Hostel Subsidy is applied now: ..
14. (a) Whether the child for whom the CEA is applied for is a disabled child: YES/NO
(b) If yes, indicate the nature of disability:
(c) Date of disability certificate.
(d) Indicate the percentage of disability:
15. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No.
16. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached: Yes/No

17. If Yes at Item No. 16, Amount claimed for Hostel Subsidy:.....
18. (i) Certified that the fee/amount indicate above had actually been paid by me.
(ii) Certified that my wife/husband is/is not a Central Government Servant.
(iii) Certified that my husband/wife Sri/Smt:..... is presently working
as : inand that he/she shall not apply/has not applied
for the Children Education Allowance for the child mentioned above.
(iv) Certified that I or my wife/husband has not claimed this re-imburement from any
other source and will not claim the same in future.

17 Certified that my child in respect of whom reimbursement of Children Education Allowance is applied is studying in the School/Jr. College which is recognized and affiliated to Board of Education/University.

18. The information furnished above are complete and correct and I have not suppressed any relevant information. In the event of any change in the particulars given above which affect my eligibility for reimbursement of Children Education Allowance, I undertake to intimate the same promptly and also to refund excess payments if any made. Further, I am aware that if at any stage the information/documents furnished above is found to be false, I am liable for disciplinary action.

Signature:

Name:

Design & Station

Working Under:

Date:

The family composition of the claimant has been verified from the official records such as Pass Declaration/Register etc and found correct.

Date:

**Signature of Sr. Subordinate
With office seal and stamp**

FOR OFFICE USE ONLY

Sl. No.	Name of staff	P.F.No.	CEA Amount	Hostel Subsidy Amount if any	Total

Forwarded to : Sr.DFM/CKP for vetting and early return.

Bill Clerk/OS

Bill Compiling Officer

BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

This is to certify that Master/Baby/Mr./Miss Roll
no..... Admission No..... son of
Sri/Smt..... is a bonafide student of this school and studied
in Class..... during the financial year and as per School records his/her
date of birth is in words
.....

This is to also certify that the above named child had studied in this school in the
previous academic year.....

He/She bears a good moral character.

** During the year Master/Baby/Mr./Miss..... had resided in
the residential complex (Hostel) of the school and paid an amount of Rs..... toward
boarding and lodging in the residential complex.

This Institution/School is affiliated recognized by
..... **and the affiliation/recognition Number**
is.....

Dated:

Place:

Signature Head of the
Institution/School
(with Stamp and seal)

** (Strike out it is not applicable)