



**LEAVE TRAVELLING CONCESSION  
SPECIAL CASH PACKAGE  
APPLICATION FORM**

**Reference :** 1. Office Memorandum No. F.No.12(2)/2020-E II (A) dated 12<sup>th</sup> October, 2020 issued by the Ministry of Finance, Department of Expenditure regarding Special cash package equivalent in lieu of Leave Travel Concession Fare during the LTC Block 2018-21.

2. O.M. No. 12(2)/2020-E.II(A) dated 20<sup>th</sup> Oct. 2020 regarding clarification on the queries thereof.

Sir,

With the reference to the above, I hereby request you to kindly grant me a Special Cash Package Equivalent in lieu of Leave Travel Concession Fare for the LTC Block year \_\_\_\_\_ ( ).

Necessary details are furnished hereunder:

1.	Name	
2.	Designation	
3.	Department	
4.	Basic Pay	
5.	Pay Level	
6.	No. of Days for Leave Encashment (upto 10 days)	

**2. Particulars of members of Family in respect the claim is to be made.**

Sr. No.	Name	Age	Relationship with the Govt. servant	Occupation

Date :

Signature of HoD/ Section Head.

Signature of Employee

**For Official Use**

Service Book verified, as per above referred circular Special cash package equivalent in lieu of Leave Travel Concession Fare for the LTC Block year ----- is admissible / Not admissible.

Sr. Assistant (Estt)

Sr. Superintendent(Estt)

O.S.D.(Estt)

Registrar/Dean(F.W.)