



**LEAVE TRAVELLING CONCESSION
SPECIAL CASH PACKAGE
BILL SETTLEMENT FORM**

Reference : Office Memorandum No. F.No.12(2)/2020-EII (A) dated 12th 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 and O.M. No. 12(2)/2020-E.II (A) dated 20th Oct. 2020 regarding clarification on the queries thereof.

PART-A

1.	Name of Employee	
2.	Designation	
3.	Department	
4.	Basic Pay	
5.	Pay Level	
6.	LTC Block for Special Cash Package	
7.	No. of days EL Encashed	
8.	Institute Office Order Number and Date (Please Enclose Photo Copy)	

2. Particulars of members of Family in respect whom the claim has been made.

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

3. Details of Bills Invoices in the name of claimant. (Kindly enclose original self certified Bills/Invoices) alongwith proof of digital payment made by employee (or family member eligible for LTC) :

Sr. No.	Particulars of Goods/ Services procured	Rate of GST (In %)	Gross Amount (in Rs.)	Remarks (if any)
			Total	
	Less Advance drawn (if any)		Rs.	
	Net payable/ refund		Rs.	

Declaration

I hereby certify that the claim for Leave Travelling Concession Special Cash Package for the LTC block and declare that the above information is correct and true to the test of my knowledge and belief. I also certify that the Bills/ Invoices are in my name and proof of digital payment made by me (or family member eligible for LTC) is genuine and authentic.

Signature of Employee

For Official Use

Certified that necessary entries have been made in service book of
Shri/Smt.Designation
Department.....

Sr. Assistant (Estt)

Sr. Superintendent(Estt)

O.S.D.(Estt)

To
Deputy Registrar(Accounts)
VNIT, Nagpur.