

MAHARSHI DAYANAND UNIVERSITY ROHTAK

Medical charges Reimbursement Bill for the Month of _____

Name of the Scheme:- Medical (Charges) Reimbursement

Code 9/400050

EMP NO	Name & Designation Of the Employee	Sanctioning Office	Admissible Amount	Deduct Net if any Payable
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Forwarded/Countersigned

Signature of claimant

(on revenue stamp)

HOD/Branch Officer

FOR USE OF ACCOUNTS BRANCH

Budget provisions exit-
Code 9/400050

Entry M.R. Page _____

Pay Rs. _____

In words _____

Clerk/Assistant

Supdt.(Bills) S.A.O.

FOR USE OF AUDIT BRANCH

Passed for payment of

Rs. _____

(In words) _____

Auditor

R.S.A.