

CLAIM FORM FOR REIMBURSEMENT OF TELEPHONE/MOBILE/BROADBAND BILL

Name of Employee			
Designation		P.F. No	
Pay in Pay Band		G.P./A.G.P.	
Department / Section			

Rate for reimbursement as per GoI, Ministry of Finance Order No : 24(3)/E.Coord/2018 dt 26 Mar 2018, adopted vide IISER Berhampur Office Order No : IISERBPR/RO/OO/2019/46 dt 18 Oct 2019.

Level Of Officer/Official	Monetary Ceiling(in ₹)	Pay level
	Amount in Rupees	
Secretary/Spl Secretary/Or equivalent	Rs 4200/- per month + taxes as applicable	17
Addl. Secretary or equivalent	Rs 3000/- per month + taxes as applicable	15 & 16
Joint Secretary and equivalent	Rs 2700/- per month + taxes as applicable	14/14A
Director/Deputy Secretary /PSO	Rs 2250/- per month + taxes as applicable	12/13/13A1/13A2
Executive Engineer/Scientific Officer/Technical Officer/Assistant Registrar	Rs 1200/- per month + taxes as applicable	10 & 11

Sr. No.	For the month of	Bill/Rect. No. & Date	Telephone / Mobile No.		Sub Total (Rs.)
			No:	No:	
			Amount (Rs.)	Amount (Rs.)	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
Grand Total Rs.					

Certificate

Certified that the telephone bills indicated as above have actually been paid by me, Bills/Receipts are enclosed in original and the expenditure is related to official calls from Residential Telephone/Mobile.

Dated :

(Signature of the employee)

Passed for Rs. :		(Rs. in words)	
Prepared by	Checked by	Recommended by	Approved as per Rules
Office Assistant	Jr. Supdt. / Supdt.	AR(F&A)/ DR (F&A)	FA & C A.

