## PROFORMA FOR SPECIAL CASH PACKAGE EQUIVALENT IN LIEU OF LTC FARE

1.	Name of the applicant		:				
2.	Designation/post		:				
3.	. Department/Section		:				
4.	. Date of Joining		:				
5.	. Basic Pay & Pay level		:				
6.	Whether advance is require		red: Yes/N	0			
7.	Last LTC availed		:				
8. (as		Details of family service book records)	: Spouse,	C/B	/12:	C/A/12:	Dependent:
9.	l	_eave encashment	: Yes/No.	to	tal No. o	f days	
10 blo		Details of amount claimed ear 2018-21.				e equivalent in l	lieu of LTC fare for the
	(a)	No. of family members special cash package Name & relation)					
	(b)	Deemed LTC fare per person					
	(c)	Total deemed LTC fare in Rupees (Deemed fare X No. of persons)					
	(d)	Leave encashment amount in Rupees					
	(e)	Expenditure details in Rupees (with require document may attach separately)					
	(f)	Claimed amount (leave 3 time of national airfare	9)				
	(g)	Admissible amount [lea + fare value (100 encashment and 50% may be paid as an advantage of the fare to the fare value of	)% of I of fare v	eave			

- 11. My wife/husband is a Govt. employee and has not been claimed similar special cash package equivalent in lieu of LTC fare for the block year 2018-21.
- 12. I declare that the particulars furnished above are true and correct to the best of my knowledge. I undertake to produce the receipts within 30 days towards purchase or availing goods and services which carry a GST rate of not less than 12% from GST registered Vendors/Service providers through digital mode indicating clearly the GST number and the amount of GST paid.
- 13. In the event of cancellation of the application or if I fail to produce the valid receipts within the stipulated time frame, I undertake to refund the entire advance/deducted from my salary in one lump sum along with penal interest as applicable in the current financial year 2020-21.