

BIRBAL SAHNI INSTITUTE OF PALAEOBOTANY, LUCKNOW

Form of Application for a temporary advance From General Provident Fund

1. Name and Designation of the Subscriber : _____
2. Account Number : _____
3. Pay : _____
4. Balance at credit of the Subscriber on the date of application. : _____
5. Amount of advance outstanding if any, and the purpose for which advance was withdrawn. : _____
6. Amount of advance required : _____
7. Purpose for which the advance is required (Rule 12) : _____
8. Amount of the consolidated advance (Item 6 & 7) and number & amount of monthly instalments in which the consolidated advance is proposed to be repaid. : _____
9. Full particulars of the pecuniary circumstances of the subscriber, justifying the application for the temporary withdrawal. : _____

Signature of the Applicant

Date:

FOR OFFICE USE

The advance is admissible/not admissible under Rules.....
Director may kindly sanction the payment of Rs.....Recovery of the consolidated advance will be made in equal montly instalments of Rs.....each and the last instalment being of Rs.....only.

Section Officer (F & A)

ACCOUNTS OFFICER

REGISTRAR

DIRECTOR

FOR OFFICE USE ONLY

FORM OF SANCTIONS TO TEMPORARY ADVANCES FROM G.P.F.

Sanction is hereby accorded under Rule.....for grant of a temporary advance of Rs.....(in Words)
.....
to Shri/Lt./Mrs./Miss.....from his/her G. P. Fund.....to enable him/her to defray expenses on.....

The advance will be recovered in.....monthly instalments of Rs.....each, commencing from the salary of.....
Payable in.....A sum of Rs.....
(in words).....out of the advance of Rs.....
(in words).....sanctioned and paid to him/her in.....will be outstanding till the commencement of the recovery of the consolidated amount as specified below. This amount together with the advance now sanctioned aggregating Rs.....in words (Rupees.....)
.....) will be recovered in.....monthly instalments of Rs.....each commencing from the salary of.....payable in.....

Signature :

Seal :

Date :

Rs..... (Rupees.....only).

DIRECTOR

BIRBAL SAHNI INSTITUTE OF PALAEOBOTANY, LUCKNOW
53 UNIVERSITY ROAD, LUCKNOW

RECEIPT

I Dr /Mr/Mrs Received a sum of Rs
(Rupees only) through
Cash/Cheque No Dated from the
Director, Birbal Sahni Institute of Palaeobotany, Lucknow on account of my
Salary / Pension / Arrears of D.A. / Other payment as mentioned below for the month of
.....

Dated:

Signature on Rs. 1/- Revenue
Stamp

Designation

AUTHORITY LETTER

I authorise Dr. /Mr./ Mrs..... to receive a sum of
Rs (Rupees only) through
Cash/ Cheque No Dated on my behalf from the
Director, Birbal Sahni Institute of Palaeobotany, Lucknow.

Signature

Name

Dated

Designation