

APPLICATION FOR ENCASHMENT OF EARNED LEAVE FOR L.T.C. PURPOSE CLAIMED FOR THE  
BLOCK YEAR:

1	Name of the Officer:	
2	Designation	
3	No of days claimed for encashment	
4	Period of EL/CL availed during LTC.	
5	EL Balance at Credit	
6(i)	Basic Pay	
6(ii)	Grade Pay	
6(iii)	DA	
6(iv)	Total	
7	Amount claimed for encashment of 10 days (will be filled by the office)	

Name of the Government Servant:  
Designation:

Signature