

NATIONAL INFORMATICS CENTRE  
Department of Information Technology  
Ministry of communications and Information Technology  
Government of India

ABSTRACT PROFORMA

FOR

CLAIMING RESIDENTIAL TELEPHONE/MOBILE/BROADBAND CONNECTION BILLS FOR \_\_\_\_\_

Name of the officer

Designation

Emp. Code

Place of Posting

Residential Address

Sl. No.	Phone No.		Cell No.		Broad Band		Amount Passed (to be filled in by Admn)
	Period	Amount	Period	Amount	Period	Amount	
1							
2							
3							
4							
5							
6							

Certified that above bills have been paid by me. Also certified that the above claims have not been claimed and paid to me previously.

Signature of claiming officer

Name  
Designation  
Emp. Code