

Government of India
Ministry of Communications
Department of Communications
G-I Section

No. 22-2/2005-G-I

Dated 06.11.2017


CIRCULAR

Subject: Entitlement for Purchase/Reimbursement of Briefcase/ Ladies purses as per 7th CPC –regarding.

In partial modification of this office Circular of even number dated 02.11.2005 on the subject mentioned above, the competent authority has approved the following monetary ceilings for purchase/ reimbursement of cost of Briefcases/Ladies purses:

S.No.	Revised eligibility Level for Reimbursement as per 7 th CPC (Pay Matrix –level)	Ceiling of reimbursement (In Rs.)
1	Level – 17	10,000/-
2	Levels 15 and 16	8,000/-
3	Level 14	6,500/-
4	Levels 12, 13	5,000/-
5	Levels 8, 9, 10 and 11	4,000/-
6	Levels 6 and 7	3,500/-

2. The entitled officers/officials are free to procure briefcases/ladies purses of their own choice from any of the private/public outlet. However, reimbursement shall be restricted to the above mentioned ceilings concomitant with the respective level (as per 7th CPC) of officers/officials.
3. The periodicity of replacement shall continue to be 3 years across all categories.
4. The above ceiling is valid for the period commencing from 01.10.2016 and till further orders.
5. The claim may please be submitted alongwith the original Bill/ Cash Receipt in the format prescribed overleaf.


(Nithali Ram)
Under Secretary (T)

To

1. All concerned officers/officials in the Department of Telecommunications, Sanchar Bhavan, New Delhi.
2. Pay & Accounts Officer (PAO), DoT/Section Officer (Cash), DoT.

APPLICATION FOR CLAIM OF REIMBURSEMENT FOR PURCHASE OF BRIEFCASE / LADIES PURSE/HANDBAG ETC BY OFFICERS/OFFICIALS OF DEPTT. OF TELECOMMUNICATIONS

PART 'A' **To be filled by the Claimant**

S. No.	PARTICULARS	DETAILS
1.	Name of the Claimant	
2.	Designation	
3.	Employee No.	
4.	Office Address with Tel./Mobile No.	
5.	Pay level as per 7 th CPC Pay Matrix (Grade equivalent)	
6.	Pay level as per 7 th CPC Pay ,matrix (Stage equivalent)	
7.	Description of item purchased	
8.	Eligible amount of reimbursement	
9.	Date of previous purchase / reimbursement, if available, otherwise on the basis of self-certification	
10.	Whether Bill / cash Receipt enclosed, along with Seller, No., date and amount	
11.	Name of Bank	
12.	Bank Account No.	
13.	IFSC Code	

I hereby certify that I have not claimed and been paid any reimbursement for Briefcase / handbag etc during the last 3 years in this or my previous office.

.....
(Signature of Claimant)
Dated:.....

PART 'B' **FOR OFFICE USE ONLY**

Entry.....

14.	Amount admissible to the claimant	
15.	Amount claimed	
16.	Amount passed for reimbursement	

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