Format of Reimbursement of Hotel Charges

KENDRIYA VIDYALAYA SANGATHAN

SELF-DECLARATION CERTIFICATE

(FOR LEVELS 8 AND BELOW)

I _____ (Name of employee with Designation) certify that Rs _____has been paid by me towards the Hotel Charges as per details given below:-

1.	**Name of Employee**	**:**
2.	**Designation**	**:**
3.	**Pay Level & Basic Pay**	**:**
4.	**Kendriya Vidyalaya**	**:**
5.	**Name of Dwelling with Address**	**:**
6.	**City Name**	**:**
7.	**Period of Stay & Total Days**	**:**
8.	**Per Day Charges**	**:**
9.	**Total Amount Paid**	**:**

Signature of Employee (With Date)

Format of Reimbursement of Travelling charges

KENDRIYA VIDYALAYA SANGATHAN

SELF-DECLARATION CERTIFICATE

(FOR LEVELS 8 AND BELOW)

I _____ (Name of employee with Designation) certify that Rs _____has been paid by me towards the Travelling charges (within a city) as per details given below:-

1. **Name of Employee :**

2. **Designation :**

3. **Kendriya Vidyalaya :**

4. **Pay Level & Basic Pay :**

5. **Journey Details :**

Sl	Date	From	To	Type of Vehicle (Car/Auto/ Taxi/etc)	Vehicle No.	Total Dist. (in KM)	Amt. Paid
a)							
b)							
c)							
d)							
e)							
f)							
g)							
h)							

Signature of Employee (With Date)

Format of Food Bill/ DA Reimbursement

KENDRIYA VIDYALAYA SANGATHAN

SELF-DECLARATION CERTIFICATE

(FOR LEVELS 8 AND BELOW)

I _____ (Name of employee with Designation) certify that Rs _____has been paid by me towards the Food Bill/DA as per details given below:-

1. **Name of Employee :**
2. **Designation :**
3. **Pay Level & Basic Pay :**
4. **Kendriya Vidyalaya :**
5. **Period of Absence :**
   From
   To
6. **Total No. of Days :**
7. **Total Amout Claimed towards Food Bill/DA @ _____ :**

Signature of Employee (With Date)