



རྒྱལ་ཁབ་འབྲུག་གཞུང་། བཀྲིས་རྫོང་ཁུལ་བདག་སྐྱོང་།

**ROYAL GOVERNMENT OF BHUTAN**

**DZONGKHAG ADMINISTRATION**

**TRASHIGANG: BHUTAN**

FINANCE SECTION



**SALARY ADVANCE FORM**

<b>PARTICULARS</b>	<b>DETAILS</b>
Employee Name:	
Employee ID No.	
CID.No	
TPN	
Bank Account No.	
Grade/position level	
Designation	
Office Address	
Basic Pay	
Amount Requested	

I.....(applicant) hereby confirm that particulars mentioned above are all correct.If the said amount is sanctioned, I authorize the concerned office to recover the amount on installment basis from my salary within the financial year.In the event of default on my part,or leaving my present service or in any other exigencies,if the salary advance is not liquidated,I give my consent to the concerned office to recover the outstanding amount from my post retirement benefits payable to me.

Signature of applicant.....  
Date.....

Cross checked by  
Name and signature of Accountant  
Date.....

Verified By  
Accounts Officer  
Date.....

**Approving Authority(Head of Agency)**

Signature.....  
Date.....

