CERTIFICATE OF TRANSFER OF CHARGE

(*G.O Ms.No.609, Finance dated 4th September 1933 No.772, Finance dated 9th December 1935 and No.130, Finance dated 4th March 1936*)

**Headquarter : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Post: **\_\_\_\_\_\_**\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Order under which transfer of

charge made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### RELIEVED OFFICER

1.Name and initials (BLOCK LETTERS): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# For use in Audit Office

Entered in A/R \_\_\_\_\_\_

Entered in L/Acct\_\_\_\_

Entered in H/S \_\_\_\_\_\_

Leave salary issued

Certificate

Auditor PO/SAO

2. (i) If proceeding on leave \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

a) Duration of leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) Address during leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c) Place at which leave salary is to be drawn: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ii) If retiring or if proceeding on leave preparatory to retirement and if it is proposed to draw the Provident Fund money immediately – whether application for withdrawal of Provident Fund money has been sent to the Accountant – General.

OR

(iii) If on transfer – **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

a) Post: **\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** and

b) Station: \_ **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

to which transferred.

3. Certified that I have brought upto date all the confidential reports/AARs and handed over to my successor for which I am the initiating officer

4. Official designation if only holding charge in addition to other duty **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

5. SIGNATURE :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RELIEVING OFFICER**

# For use in Audit Office

Entered in A/R \_\_\_\_\_\_\_\_\_

Entered in H/S \_\_\_\_\_\_\_\_\_

Joining time \_\_\_\_\_\_\_\_\_\_\_

Admissible

Joining time\_\_\_\_\_\_\_\_\_\_\_

Taken

Pay slip issued

Auditor PO/SAO

1. Name and initial (BLOCK LETTERS): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. (i) Whether returning from leave:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(ii) If so, place at which orders of posting were received:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(iii) If not, from what:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

a) Post: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

b) Station: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

c) Date of relief at old station: **\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Certified that I have taken all the confidential reports/AARs upto date from my predecessor

If only holding charge in addition to other duty \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

a) Official designation of relieving officer

b) Name of officer posted if known \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Copy to: