



དཔལ་ལྷན་འབྲུག་གཞུང་།
 རྫོང་ཁག་བདག་སྐྱོང་། གཞུང་ལམ་སྐྱོང་།
Royal Government of Bhutan
Dzongkhag Administration
Zhemgang



Salary Advance Form

Particulars	Details
Employee Name	
Employee ID	
CID No.	
Position level	
Designation	
TPN	
Bank Account number	
Working agency	
Amount requested (Max. one basic pay)	
Amount approved (will be filled in by Accounts section)	

I _____ (applicant), hereby confirms that particulars mentioned above are all correct. If the said amount is sanctioned, I authorize the concerned office to recover the amount 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 salary 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 & signature of Accountant

Date.....

Verified by:

(Finance Officer)

Date.....

Approving authority (Head of the agency)

Signature

Date.....