

**PART – 6****DETAILS OF LEAVE TRAVEL CONCESSION AVAILED**

Two /four year LTC/Home Town for Block Year _____ (Block Year-wise) Block-year Calendar						
Sl. No.	Name	Relationship	Age(yrs)	Place of visit	Whether availed ten days leave encashment	Upload Sanction Order
1.						
2.						
3.						
4.						

LTC Journey commenced on \_\_\_\_\_ Bill No. &amp; Date \_\_\_\_\_