## **K.F.C Form - 7**

[See Chapter IV Article 81 (a)]

## REPORT OF TRANSFER OF CHARGE

	adquarters:st							
Ord	der under which transfer of charge is made							
	RELIEVED OFFICER							
1.	Name and Initials (Block Letters)							
2.	i) If proceeding on leave							
	a)Nature ,duration and period of leave							
	b)Address during leave							
	ii) If on transfer							
	a) Post							
	b) Station to which Transferred							
3.	Signature							
4.	Regular Post held(if only additional charge)							
5.	Signature, Designation and address of							
	Countersigning officer(if onny necessary)							
	RELIEVING O	<u> OFFICER</u>						
6. 1	Name and Initials (Block letters)							
7	(i) whether returning from leave							
	(ii) If so, place at which orders of posting							
	were received							
	(iii) If not from that-							
	(a) post							
	(b) station transferred							
	(c) Date of relief at the old station							
8.	Signature							
9.	Regular post held (if only holding additional charge)							
10.	Name of treasury from which payment is to be drawn							
11.	Signature Name and Designation of countersigning officer (if only necessary)							

Note: 1. The report of transfer of charge should be sent by the officer concerned by post on the same day to the Accountant General (A&E)

- 2. When the reports of transfer of charges are signed conjointly by the relieving and relieved officers each of them should forward separate copy of the report to the Accountant General (A&E) with the duly filled up covering letter on the facing page.
- 3. A copy of the report of transfer of charge should simultaneously be sent to the concerned treasury officer.

		Γ	NO -	
		I	Dated -	
From				
	(Full address including PIN code to be given	here)		
То				
	THE ACCOUNTANT GENERAL (A&E	)		
			••••••	
	Ref: Entt. No. GE			
Sir,				
т	f 1' f f f	· · · · · · · · · · · · · · · · · · ·	. /1:	1 / . 1 / 1. 1. 1
	am forwarding my report of transfer of c			
charg	e of the post of		••••••	
on		. Forenoon / Afterno	oon.	
				Yours faithfully
				,
For th	ne use of the A&E OfficeEntered			
Enter	ed in			
	Register }			
Enton	ed in the			
	e Account			
Pay S	lip Issued on			
Accou	untant SO/AAO			

Copy to:

<sup>\*</sup> Strike off whichever is not applicable