

FROM

TO

HEAD MASTER,  
Z.P.H.School, \_\_\_\_\_  
\_\_\_\_\_

The Deputy Educational Officer.,  
\_\_\_\_\_  
\_\_\_\_\_.

RC.No. \_\_\_\_\_, Dated: \_\_\_\_\_

Sir,

SUB: Education-Sec. Education – ZPHS \_\_\_\_\_  
Sri /Smt \_\_\_\_\_  
\_\_\_\_\_ - Submission of Medical Reimbursement Proposals-Req.-reg.

REF: 1) G.O.Ms.No.74 M.H.&F.W.Deptt. Dated.15-03-2005.  
2) Rc.No. \_\_\_\_\_ Dated: \_\_\_\_\_ of the DME., A.P  
3) G.O.Ms.No. 105 H.M&F.W.(K1) Deptt. Dated:09-4-2007.  
4) G.O.Ms.No. 68 H.M&F.W.(K1) Deptt. Dated:28-03-2011.  
5) Rc.No.ESWE02-24021/11/2021-MDCL-CSE, Dated:16-12-2021 of CSEAP.  
6) Other Connected Papers.

-x-x-x-x-

I do here by submit that the My proposals of Sri/Smt \_\_\_\_\_

\_\_\_\_\_Mandal, \_\_\_\_\_District regarding Medical  
Reimbursement of exepenses incurred by the Self / dependent inrespect of  
\_\_\_\_\_who has been suffering from \_\_\_\_\_

\_\_\_\_\_and necessary investigations, Operation and treatment in the \_\_\_\_\_  
\_\_\_\_\_Which is declared as  
referral hospital as per reference 2<sup>nd</sup> cited above during the period From \_\_\_\_\_ TO \_\_\_\_\_

In pursuance of the incumbent's genuine application for the reimbursement of Medical  
expenses for the said treatment and investigation for Rs. \_\_\_\_\_/- ( \_\_\_\_\_  
\_\_\_\_\_ rupees only) .

I do hereby forward his application along with the following connected papers so as to bring to your  
notice for favourable action for issuing necessary orders regarding.

Thanking you sir,

Yours faithfully,

**Enclosures:**

1. Check list & Appendix-II
2. Essentiality & Emergency certificates
3. Dependent Certificate & Discharge summary
4. Referral Hospital G.O.
5. Non-Drawal certificate
6. Original Bills & Abstract
7. Other Connected Papers.