

APPLICATION FOR CONTRIBUTION TOWARDS VCPF (FOR COMPUTER CENTRE)
FOR THE MONTH OF _____

1. Name of the Employee : _____
2. Emp.No. : _____
3. Actual Amount to be recovered : Rs. _____

Date : _____ Signature of the Employee

Office Supdt./CBS

(for CBS use)

4. Basic Pay : _____
5. Actual Amount to be recovered :
(Repeat the item No.3)

I declare that I have not increased the VCPF more than
TWO times and not decreased more than ONE time during the
Financial year.

Date : _____ Signature of the Employee

Name : _____
Emp.No. : _____
Shop/Tkt.No : _____
Forwarded to OS/CBS

OS/SSE

Note : Application should be submitted before 10th of the
calender month. In case of stop recovery indicate
0000 at the column No.3 & 5.