

ASSAM SCHEDULE – III (Sec. II) FORM NO. 81
CERTIFICATE OF TRANSFER OF CHARGE

1. The Commissioner & Secretary to the Govt. of Assam, Medical Education and Research Deptt., Dispur, Guwahati – 6
2. The Director of Medical Education, Assam, Six-Mile, Khanapara, Guwahati – 22
3. The Accountant General (A&E), Assam, Maidam Gaon, Beltola, Guwahati- 29
4. The Treasury Officer, Lakhimpur Treasury, North Lakhimpur –787001
5. The Accountant (College)/(Hospital), L.M.C./L.M.C & H, North Lakhimpur
6. Person concerned
7. Office copy

Sir,

With reference to the rule 145 of Assam Financial Rules, I/We the undersigned have the honour to report that I/We have this.....day of.....at.....O' Clock forenoon/afternoon received and handed over charge of the office ofDeptt.of..... Lakhimpur Medical College, North Lakhimpur, District Lakhimpur as per Govt. Order issued vide notification no.dated.....of the Govt. of Assam.

I/We have occupied the official residence allotted to me with effect from.....day of.....

Relieving Officer
Name in block letters
(Office seal)

I/We have vacated the official residence allotted to me with effect from.....day of.....

Relieved Officer
Name in block letters
(Office seal)

And with reference to the rule 81(a)(vii) Assam Financial Rule, I have relieving officer acknowledge to have received Rs.....of the permanent advance and that the full amount of such is due from and to be accounted for by me.

Signature
Relieving Officer with Designation

Memo No.....Dated North Lakhimpur the

Forwarded to the above-mentioned addresses

Principal cum Chief Superintendent
Lakhimpur Medical College & Hospital
North Lakhimpur, Assam