



དཔལ་ལྷན་འབྲུག་གཞུང་།
དར་དཀར་ནང་རྫོང་ཁག་འདུལ་སྐྱོང་།

Royal Government of Bhutan

DAGANA DZONGKHAG ADMINISTRATION



BHUTAN - INDIA
An Enduring Friendship

SALARY ADVANCE FORM	
Name of Employee & Designation:	
EID/CID No.:	
Agency/Sector:	
Advance Amount:	
Purpose:	

Declaration
I declare that I do not have any outstanding salary to my credit till date.
Dated Signature of Employee

Confirmation
The Salary Advance amount of Nu _____ only (Basic Pay) is sanctioned and Nu. _____ per month will be deducted w.e.f. _____ month.
Dated Signature of Finance Officer

Head of Agency
Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>
Dated Signature of Head of Agency (Remark if any)