

JOINT DECLARATION

FOR CLAIMING REIMBURSEMENT OF MEDICAL EXPENDITURE or
LEAVE/HOME TRAVEL CONCESSION or CHILDREN EDUCATION
ALLOWANCE

(Applicable where both Wife & Husband are Govt. Employees, beginning of
each financial year)

Declaration by the Husband

I, _____ hereby declare that my wife
Mrs. _____ is employed in _____
as _____. I also declare that :

I will avail all the benefits viz. Medical/LTC/HTC/CEA from my office for myself
and my family members as mentioned below:

or

from the office of my wife for myself and my family members as mentioned
below.

S.N.	NAME	Relationship	DOB (for Children)

Signature of Employee _____

Date _____

Note: 1-Acceptance of the declaration by the competent Authority in the spouse's office
should be submitted along with this declaration, failing which it would not be accepted.

2-In case of any change in future, the same should also be intimated jointly.

Declaration by the Wife

I, _____ hereby declare that my husband
Mr. _____ is employed in _____
as _____. I also declare that:

I will avail all the benefits viz. Medical/LTC/HTC/CEA from my office for myself
and my family members as mentioned below:

or

from the office of my husband for myself and my family members as mentioned
below.

S.N.	NAME	Relationship	DOB (for Children)

Signature of Employee _____

Date _____

Note: 1-Acceptance of the declaration by the competent Authority in the spouse's office
should be submitted along with this declaration, failing which it would not be accepted.

2-In case of any change in future, the same should also be intimated jointly.