

T.R. FORM NO. 20

[See T.R. 4.101]

D.D.O. Code _____

Annual Increment Certificate

Certified that the Government employee(s) mentioned below have earned annual increment with effect from date(s) noted against each in Col. 6 and such increments have been allowed by the Head of the Office (or competent authority).

| Sl. No. | Name of the incumbent | Whether substantive or officiating | Scale of pay of post | Present pay | Date from which present pay is drawn | Date of present increment | Pay on increment | Reasons for with-holding increments beyond specified date | | Remarks |
|---------|-----------------------|------------------------------------|----------------------|-------------|--------------------------------------|---------------------------|------------------|---|----|---------|
| | | | | | | | | Suspension (not treated as duty) | | |
| | | | | | | | | Leave without pay | | |
| | | | | | | | | Other reasons | | |
| | | | | | | | | From | To | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| | | | | | | | | | | |

Bill Clerk

Accountant

Signature and Designation of the Drawing Officer