

To,

The Director
NIELIT,
Gorakhpur

Sub: Reimbursement of Medical Expenses-reg.

Sir,

I would like to inform you that during the period from.....to
..... I have incurred an amount of Rs..... (Rupees.....
.....) towards medical treatment of self and family.
You are therefore requested to kindly reimburse the amount of Rs. as per the
provision of service rules of Society.

Thanking you,

Yours faithfully

Name:

Designation:

NIELIT, Gorakhpur