

EMP. CODE :.....

TRANSFER OF DISPENSARY

1. No. of CGHS Identity Card :
2. Name of the Government Servant :
3. Ministry/Department in which employed : Office of the DC(MSME).
Ministry of Micro , Small &
Medium Entreprises,
A-Wing , Nirman Bhavan
New Delhi-110011
4. Previous residential address & dispensary from
which transferred :
5. New Residential Address :
6. Signature/Thumb impression of Govt. Servant :
7. New dispensary allotted by the issuing authority :
8. Signature & Designation of issuing authority
(Tel.No.) :

Dated :

Intercom No.

Telephone No.

Email Address

9. Signature of Medical Officer incharge dispensary :
from which transferred.
10. Signature of Medical Officer Incharge dispensary :
to which transferred.