



ALL INDIA ASSOCIATION OF COAL EXECUTIVES (AIACE)

(Regd. Under the Trade Union Act, 1926; Regd. No. 546 / 2016)

302, Block No. 4, Ram Krishna Enclave, Nutan Chowk, Sarkanda; Bilaspur (CG)

E-mail : centralaiace@gmail.com ; Ph. 9907434051

Ref No. **AIACE/CENTRAL/2023 / 002**

Dated 18.1.2023

To
CMD, CCL,
Darbhanga House,
Ranchi (Jharkhand).

Sub:- Appeal on Reimbursement of Medical Bills of Sri Ashok Singh, Retd GM,(X), EIS No. 90079039,
pending in Finance Department

Dear Sir,

Your kind attention is requested to be drawn to the copy of a representation to us by our member Sri Ashok Kumar Singh, Retd. GM (X), CCL, EIS No. 90079039 on reimbursement of his 13 nos. of Medical claims which are unfortunately pending at Finance deptt of CCL. (vide Annexures- I to IV).

You are once requested to kindly look into the matter and take necessary action in this regard so that his claims are settled in the earliest possible time.

Thanking You,

(P. K. SINGH RATHOR)
Principal General Secretary

Encl: As above

CC

1. D(P), CCL
2. CMS, CCL

To
The Principal General Secretary
AIACE
Bilaspur.

Sub:- Payment of my medical bills which
are lying in finance for long time

Dear Sir,
13 medical bills have been passed
by the competent authority and lying in
finance dept for payment but till it
was not paid to me.

You are kindly requested
to look into the matter and take
necessary action for the earliest payment.

Thanking you, Sir

Yours faithfully,
(Signature)

29/11/22
Asst. Secy. (L-2)
E + C M (L-2)
C.L.L.

Emplyoee No 90079039

Medical Cont No CDPMCE/09/11/463

AIACE membership 3305

Signature
 Name at the time of retirement
 No. & date

Company opted for reimbursement
 Address
 Amount deposit

Sl. No.	Amount	Current	AMOUNT PASSED			Date of Deduction
			EPF	Income Tax Lump Sum	EPF in Employment Hospital	
1	10000	10000	-	-	10000	10/10/19
2	10000	10000	-	-	10000	10/10/19
3	10000	10000	-	-	10000	10/10/19
4	10000	10000	-	-	10000	10/10/19
5	10000	10000	-	-	10000	10/10/19
6	10000	10000	-	-	10000	10/10/19
7	10000	10000	-	-	10000	10/10/19
8	10000	10000	-	-	10000	10/10/19
9	10000	10000	-	-	10000	10/10/19
10	10000	10000	-	-	10000	10/10/19

Sl. No.	Period	Balance	Due Tax	Any other Deductions	Name of Employer	Signature	Date
1	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
2	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
3	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
4	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
5	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
6	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
7	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
8	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
9	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19
10	10/10/19	2464931.89			Galaxy	[Signature]	10/10/19

Shot on razor foil



**CENTRAL COALFIELDS
Gandhinagar
BILL PASSING**

**LIMITED
Hospital
REGISTER**

R. Babli. Doreki

1. Name *Ashek W. Singh*
2. Name of spouse *Pratibha Singh*
3. Designation at the time of retirement
4. Card No & date *SPRMS/104/17463*
5. Validity

1. Date of retirement
2. Retired from
3. Company opted for reimbursement
4. Address
5. Amount deposit

*82105
113
885-19*

Sl. No	Category	Amount Claimed	AMOUNT PASSED				COG No
			OPD	Indoor Limited	Indoor with out Limit	OPD in Empanelled Hospital	
<i>24</i>	<i>Self</i>	<i>158254</i>				<i>1424254</i>	<i>707946</i>
<i>Self</i>		<i>16209</i>					

Date of COG	Period	Balance	Med. I Tax	Any other Deduct	Name of MEDICINE	Remarks	Slip
<i>1/12</i>	<i>Feb 21</i>	<i>2368179</i>	<i>00</i>		<i>GALVAN 4250ml</i>	<i>City Hospital</i>	
	<i>12/22</i>						



CCL

(A Subsidiary of Coal India Limited)
A Hindustani Company
DARBHANGA HOUSE,
Ranchi - 834001, (Jharkhand), INDIA

Reg. No. CPRASE/04/11/463

Medical Card

ANNEXURE A



Retiree



Spouse

Name of the retired executive with Employee No. A. K. Singh
 Employee No. 50073632
 Name of Spouse Prof. bha Singh
 Date of retirement 31/03/12
 Designation at the time of retirement Principal Lecturer
 Scale of pay and Basic Pay as on date of retirement Rs. 60435-90
 Company along with / Mine/ Establishment/ Unit from where retired CCL
 Company/ Establishment where Registered for CCL
 No and date of Demand Draft remitted with name of the issuing Bank

Permanent Address Village P.O. - Krishumajuli, 17 - SIMARA (Ranchi)
 Present Address with Telephonic Number 10, Jyoti Chandra School, N.T.S. Baramgola, Baramgola - 828103, Simara, Jharkhand

Name of nominee with relationship if any Prof. bha Singh
 Address of the nominee 10, Jyoti Chandra School, N.T.S. Baramgola, Baramgola - 828103, Simara, Jharkhand

Company opted for claiming reimbursement CCL
DECLARATION
 Certified that myself and my spouse are not availing any medical facilities from or through the Central/State Govt./Public Sector Undertaking/Other Govt. Body or any Medical Insurance Company either in individual capacity or as dependant (applicable for executives who have retired prior to 01.01.07)

Signature of the retired executive: A. K. Singh Signature of the spouse: Prof. bha Singh Signature of the nominee: Prof. bha Singh

Received By: A. K. Singh Date, Stamp and signature of the Receiving Office: 05/03/2012
 Validity Period of the Card: From 05/03/12 To 02/03/2014
 Date of Issue: 05/03/2012

Signature of the issuing Authority

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