

**Details of expenses for the maintenance of Office for the period.....**

1. Rent paid:  
 Monthly rent.....  
 Total months.....  
 Total rent paid .....

2. Salaries paid to staff:

S. No.	Name of staff	Monthly salary	No. of months	Total salary
1.				
2.				
3.				
	Total			

3. Postage expenses.....

4. Stationery expenses:

S.No.	Details	Rate	Quantity	Amount
1.				
2.				
3.				
			Total amount	

5. Office Maintenance.....  
 6. Electricity charges.....  
 7. Entertainment expenses.....  
 8. Personal computer maintenance expenses with details.....  
 9. Telephone charges.....(enclose receipts)  
 10. Other miscellaneous expenses:

S.No.	Detail of expenses	Amount
	Total	

**Total reimbursement claimed as office allowance.....**

I hereby certify that I am maintaining an office at (full address).....  
 ..... for the purpose of servicing the policyholders and other LIC related activities. I am fully aware of the rules related to the claiming the reimbursement of office allowance from the Corporation. I also certify that I have made all the expenses as declared above for this purpose. Supporting bills, receipts, documents are available with me and will be presented to the office for the purpose of verification when asked for.

Date:  
 Place:

Signature of Agent.....  
 Name of Agent.....  
 Agency code/ Club membership