

## UNIVERSITY OF ALLAHABAD

## ALLAHABAD UNIVERSITY CONTRIBUTORY HEALTH SCHEME CHECKLIST FOR REIMBURSEMENT OF MEDICAL CLAIMS

1.		name of Diary Holder (Block Letters)	:	
2.	Status (Employee/Pensioner/Other)			
3.	AUCHS Diary No.			
4.	Val	idity of AUCHS Card (For pensioners) &	: 1	from to
	Entitlement		:	Pvt./Semi/General
5.	The	following self attested documents are submitted	ed	
	(Ple	ase tick ( $$ ) the relevant column)	:	
	•		I	
	(a)	Medical Reimbursement claim	:	Yes/No.
	(b)	Photocopy of AUCHS Card		
		Photocopy of Health Card	4	Yes/No.
	(c)	Essentiality Certificate duly signed by	:	Yes/No.
		No. of Original Bills		
		Whether original bills/vouchers	4	Yes/No.
		have been verified		
	(f)	Copy of discharge summary		
		Copy of Referral letter	:	Yes/No.
		Whether the hospital has given breakup		2
		For lab investigations	:	Yes/No.
	(i)	If Original papers have been lost the		
		Following documents are submitted		
		I. Photocopies of claim papers	:	Yes/No.
		II. Affidavit on Stamp Paper (Value ₹100/-		Yes/No.
	(ii)	In case of death of card holder the following		
	()	documents are submitted.		
		I. Affidavit containing by		TT AT
		Claimant No objection from other legal		Yes/No
		Heirs on Stamp papers		Yes/No.
		II. Copy of death certificate	:	Yes/No.

Dated: .....

## Signature of AUCHS card Holder

Designation : Tel. No. (O) (R) e-mail Address:

Name of Bank	IFSC Code
SB. A/C No.	