

# ANDHRA PRADESH GOVERNMENT LIFE INSURANCE DEPARTMENT

## PREMIUM CUM LOAN SCHEDULE

Name of the Drawing Officer :

Drawing Officer No. \_\_\_\_\_

Cheque No. \_\_\_\_\_

Date : \_\_\_\_\_

Major Head : \_\_\_\_\_

Sub Account \_\_\_\_\_

Amount \_\_\_\_\_

Sl.No.	Policy No.	Name	Date of Birth	Present Basic Pay	Premium	Loan Installment	Total	Remarks
1	2	3	4	5	6	7	8	9

(Rupees \_\_\_\_\_) (only)

Note : 1. Details of transfers shall be furnished at remarks column.

2. Details of entire establishment shall be informed in the above proforma which should tally with the pay bills.