FORM BM-10

PROPOSED PROFORMA FOR DEPARTMENTWISE INFORMATION REGARDING PERMANENT/TEMPORARY POST DEPICTED UNDER DIFFERENT MAJOR HEADS (Non-Development)

Nominal Roll referred to in paragraph 3.6(a) and 5.6

Department_____ Date as on _____

Sr. no.	Employee Name	Designation	Deptt.	Sanctioned	Filled up	Vacant	Pay Scale	Basic Pay as on 01/07/2025	Provision pay excluding HRA/FMA(Col 11x12)	NPA (AS APPLICABLE)	NPA 12 Months	Amount of increment	Special pay/CA/any other	Total pay	HRA	FMA	Total provision of pay	DA	GPF	NPS	GRAND TOTAL	DATE OF RETIREMENT	LTC
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24

Signature of D&DO

Signature of Controlling Officer