#### Annex II

# REQUEST

### For Extra Attendance of Officers of Customs Department

|  |   |   |  | Place                |                 |                |
|--|---|---|--|----------------------|-----------------|----------------|
| To the Di                                | rector-Ge                                 | neral   |  | Dato .               |                 |                |
|  |   |   | extra attendance d   |                      |                 |                |
| (a)                                      |   |   | from (   |                      | on              | (b)<br>to      |
| (d)                                      |   |   |  |                      |                 |                |
|  |   |   |  |                      |                 |                |
|  |   |   |  |                      |                 |                |
| I/We unde                                | ertake to p                               | oay the cl  | narges prescribed  | by law for such at   | tendance.       |                |
|  |   |   |  | Signatur             | e               |                |
| (b) Ins<br>(c) Ins<br>(d) Ins<br>(e) Ins | sert date o<br>sert time a<br>sert time a | on which a<br>It which a<br>It which a<br>e of work | attendance is requattendance is requitendance is required ttendance will cease to be performed | red.<br>ed.<br>se.   | ship, aircraft  | or factory as  |
|  |   |   | e presented to the be made.  | Proper Officer in    | sufficient time | e to allow the |
|  |   |   | FOR OFFICIAL   | . USE ONLY           |                 |                |
| To                                       |   |   |  |                      |                 |                |
| The abov                                 | e request                                 | is approv   | ved. Depos   | sit of Rs            | should be       | e collected.   |
| Date                                     |   |   | Direct   | or-General           |                 |                |
| ACCOU                                    | NT OF CH                                  | IARGES  | TO BE RAISED IN  | RESPECT OF T         | HE ABOVE R      | REQUEST        |
|  |   |   |  |                      |                 |                |
| For the at<br><b>Date</b>                | tendance<br><b>From</b>                   | of Office<br><b>To</b>                              | rs:-<br>No. of hour(s)   | Rate per hour<br>Rs. | Rs.             | Cs.            |
|  |   |   |  |                      |                 |                |
|  |   |   |  |                      |                 |                |
| <br>For the tr                           | ansport of                                | Officers:   | ;_   |                      |                 |                |
| Date                                     | From                                      | То  | Partic   | ulars                |                 |                |
|  |   |   |  |                      |                 |                |
|  |   |   |  |                      |                 |                |
|  |   |   |  | Total                |                 |                |
|  |   |   |  |                      |                 |                |

I certify that the above account is correct and that the charges are raised in accordance with the Customs Regulations.

| Form I           | No. 1 |
|------------------|-------|
| FOR OFFICIAL USE | ONLY  |
|                  |       |

Date ...... Section Head.....

## FOR OFFICIAL USE ONLY

## Record of attendance of Officers employed in accordance with this request

|  | Name | Rank     | Nature of<br>Work | Hours worked |    |      | No of | Rate     | Amount      |    |    |
|--|------|----------|-------------------|--------------|----|------|-------|----------|-------------|----|----|
|  |      |          |                   | AM           |    | PM   |       | hours    | per<br>hour | Rs | Cs |
|  |      |          |                   | From         | То | From | То    |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  |      |          |                   |              |    |      |       |          |             |    |    |
|  | 1    | <u> </u> |                   |              |    |      | 1     | <u> </u> | Total       |    |    |

| N.B. Attendance on Sundays and Public Holidays to be inserted in Red ink. |              |  |  |  |  |  |
|---|--------------|--|--|--|--|--|
| Certified correct   |              |  |  |  |  |  |
| Date  | Section Head |  |  |  |  |  |