GOVT. OF NCT OF DELHI
GTB HOSPITAL
DILSHAD GARDEN : DELHI-110095

Efile no. 260739 Dated:

ORDER

All the Branch In charges/Section Incharges are hereby directed to give the details of work performed under their jurisdiction every fortnight (on 1st and 16th of Calender month) in the format given below:-

Fortnightly report for the period from _____ to _____

Sl. No.	Name of the Branch	Name & Designation of the official	Opening balance of the PUC at the beginning of fortnight	Number of PUCs received during the fortnight	Number of PUCs disposed of during the fortnight	Closing balance of the PUC at the end of fortnight	Remarks .
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
Signatures: Name : Designation of Section /Branch Incharge:							

Digitally signed by Kripa Nath Jha
Date: 11-06-2026 11:34:08

(KRIPA NATH JHA)
DMS(A)/HOO-GTBH

To

1. All Section Officers/Branch Incharges –GTBH.