

**APPENDIX K/VII**

**(See Standing Order K.28)**

Certificate to support the issue of a travel warrant or claim for transport allowance when an officer or member of his Family is referred for specialist dental treatment.

(To be attached to travel warrant or transport allowance claim)

I certify that I have examined Mr./Mrs./Miss .....  
of ..... Ministry/Department .....  
(Station) and am of the opinion that specialist dental treatment is needed in this cases.

I have therefore arranged for him/her to receive treatment from a dental surgeon at ..... and certify that it is necessary for him/her to travel to that place to receive such treatment.

**Station .....**  
**Signature of Assistant Dental Officer**

Date.....

**APPENDIX K/VIII**

**(See Standing Order K.29)**

Certificate to support a claim for subsistence allowance in respect of an officer who was required to leave his/her station to attend a Hospital/Dental Unit.

(To be attached to the claim)

(1) I certify that it was necessary for Mr/Mrs/Miss .....  
of ..... (department) .....  
(Station) to attend this Hospital/Dental Unit from .....  
20..... to .....

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**Hospital/Dental Unit**

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**Signature of officer in Charge**