

**TRAVELLING ALLOWANCE BILL**  
**FOR INVITED GUEST (EXTERNAL CLAIMANT)**



राष्ट्रीय डिज़ाइन संस्थान असम  
 National Institute of Design Assam

FORM - 16

Name : \_\_\_\_\_ Designation : \_\_\_\_\_  
 Organization : \_\_\_\_\_ Present Pay Level : \_\_\_\_\_  
 Name as per Bank record : \_\_\_\_\_ Bank Account No. : \_\_\_\_\_  
 Bank Name : \_\_\_\_\_ IFSC Code : \_\_\_\_\_  
 Purpose of Journey : \_\_\_\_\_

1. PARTICULARS OF JOURNEY (from Station to Station)						Mode of journey (Air/Train/ Steamer/Bus)	Fare (Rs.)	Distance Travelled (in km)	Ticket Nos./ Remarks
Departure			Arrival						
Station	Date	Time	Station	Date	Time				

2. PARTICULAR OF LOCAL CONVEYANCE			Mode of journey (Auto/Taxi/Car)	Distance in KM	Fare (Rs.)	Voucher Attached Yes / No
DATE	FROM	TO				

- Please attach:
- Copy of invitation / approval order for the journey.
  - Tickets, where applicable.
  - In case of e-ticket (Air), Boarding Pass is mandatory.
  - Proof of payments in all cases.
  - All bills should be signed by the claimant.

3. PARTICULARS OF OTHER EXPENSES INCURRED (Please attach proof in all cases)							
Fooding	Rs.		Hotel/Lodging Charges from		to		Rs.
Other Charges (if any), please specify,							Rs.

P.T.O.

Total amount claimed (in Rs.) (Please write "as per rules" if not sure)	
I do hereby certify that:	
<ol style="list-style-type: none"> <li>The distances for road journeys shown in the bill are correct to the best of my knowledge,</li> <li>I have travelled in a class not lower than the ones for which fares are claimed in this bill and to which I am entitled,</li> <li>The journeys were performed by the shortest routes,</li> <li>The claims for journeys mentioned in this bill have neither been preferred nor paid or will be claimed from any other sources.</li> <li>I <u>was</u> / <u>was not</u> treated as a guest of a Government / an Institution and <u>was</u> / <u>was not</u> allowed free boarding <u>and</u> / <u>or</u> lodging at the expenses of any Government / Institution for the above claim,</li> <li>I <u>have</u> / <u>have not</u> availed any free transport of any Govt / Institute or anyone else for the journeys for which claims have been made.</li> <li>The information furnished above are complete and correct and I have not suppressed any relevant information.</li> <li>I authorize to make the admissible payment directly to my Bank account.</li> </ol>	
<b>Date:</b>	<b>Signature of the Claimant</b>
Certify that Dr./ Mr./ Ms. _____	
was invited as resource person / invitee / member for _____	
at NID Jorhat, approval for the same was already taken (copy enclosed)	
<b>Signature of the Convenor / Coordinator / Faculty</b>	

<b>FOR OFFICE USE ONLY (FINANCE &amp; ACCOUNTS)</b>	
Railways/Air/Steamer/Bus Fare (in Rs.)	
Road Mileages (in Rs.) @ Rs.....P/KM for.....KMs	
Local Conveyance (in Rs.)	
Food Charges (in Rs.)	
Accommodation Charges (in Rs.)	
Any Other admissible amount (in Rs.)	
Total Admissible Amount (in Rs.)	
Less: Payment to DTA (in Rs.)	
Less: Advance, if any (in Rs.)	
Net Amount Payable (in Rs.)	
In Word (Rupees.....only)	
<b>Scrutinized by</b>	<b>Accounts Officer</b>
	<b>CFA</b>
Approval of the Competent Authority	
<b>Director/ Registrar</b>	