

TRAVELLING ALLOWANCE CLAIM BILL
FOR OFFICIAL TOUR (INTERNAL CLAIMANT)



राष्ट्रीय डिज़ाइन संस्थान असम
 National Institute of Design Assam

FORM - 15

Name of the Employee : Emp ID :

Designation : Present Pay Level :

Dept. / Section / Centre : Bank Account No. :

Account Head : Project No. :

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 approval of TA application for the journey.
 - Tickets, where applicable.
 - In case of e-ticket (Air), Boarding Pass is mandatory.
 - Proof of payments in all cases.
 - Copy of Participation Certificate in case of Seminar/ Conference etc.
 - All bills should be signed by the claimant.

P.T.O

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

Total amount claimed (in Rs.) (Please write "as per rules" if not sure)	
Advance taken (in Rs.)	
Net amount claimed (in Rs.) (Please leave blank if all details are not filled)	
<p>I do hereby certify that:</p> <ol style="list-style-type: none"> The distances for road journeys shown in the bill are correct to the best of my knowledge, 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, The journeys were performed by the shortest routes, The claims for journeys mentioned in this bill have neither been preferred nor paid or will be claimed from any other sources. 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 that Government/ the Institution visited, I <u>have</u> / <u>have not</u> availed any free transport of this Institute or anyone else for the journeys for which claims have been made. The information furnished above are complete and correct and I have not suppressed any relevant information. 	
Date:	Signature of the Claimant

FOR OFFICE USE ONLY (FINANCE & ACCOUNTS)	
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.)	
Registration Fee & Other	
Total Admissible Amount (in Rs.)	
Less: Advance (in Rs.)	
i. Paid to DTA	
ii. Paid to Claimant	
Net Amount (in Rs.)	
In Word (Rupees.....only)	
<p style="text-align: right;">Scrutinized by Accounts Officer CFA</p> <p style="text-align: center;">Approval of the Competent Authority</p> <p style="text-align: center;">Director/ Registrar</p>	