

TRAVELLING ALLOWANCE BILL

Name & Designation Bill for the Month of

Head Quarter.....	Basic/Grade Pay Rs.	DA.....	AP.....
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[illegible]

CERTIFIED THAT:

1. The journey was actually performed in the class for which charges have been claimed in this bill and no concessional rates were obtainable. Concessional rate could not be obtained due to following reasons.
2. The fares and road distance shown in the bill are correct to the best of my knowledge.
3. The journey has been performed by the shortest route and by the cheaper means/or by the longest route and expensive means was allowed by the competent authority due to urgency and in the interest of the work of Uttarakhand Council for Biotechnology, Govt. of Uttarakhand.
4. The journey has been performed and halts were made in the interest of Uttarakhand Council for Biotechnology, Govt. of Uttarakhand, Haldi, U.S. Nagar & under sanction of the competent authority.
5. The journeys were made by alternative/longer route but claim has been made as per rule.
6. The traveling allowance for the journey has not been claimed from any other sources.
7. The claim is being presented for the first time and has not been drawn before.

NOTE: Please delete whichever is not applicable.

COUNTER SIGNED

RECEIVED PAYMENT

Fix Revenue Stamp

Signature of Claimer **Mr./Dr./Prof.**.....

Full Name

Designation

OFFICE OF THE UTTARAKHAND COUNCIL FOR BIOTECHNOLOGY, GOVT. OF UTTARAKHAND, HALDI, PANTNAGAR, U.S. NAGAR

Checked and found correct

Pay Rs.

Entered on Page no. of T.A. Bill Register

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FY 2015-16

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Sign. of Accountant

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Sig. Account Officer

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Sig. of Ao/Dy./Jt./CFO