

# Atomic Energy Education Society

## TRAVELLING ALLOWANCE CLAIM (FOR TOUR)

Name :				Grade Pay :				Voucher No. :		
Designation :				Computer Code No. :				Headquarters :		
Bank A/C No. :				Advance drawn :				On :		
								Date :		
Details of Journeys performed								Amount admissible for Journey Rs.	Amount payable by Office	
Station	Mode of Travel and Class of Journey	Date			Hour	Distance KMS.	Fare Paid Rs.		Purpose	Particulars of Payment
		D	M	Y						
Dep :									1) Total Fare .....	
Arr :									2) Entitlement as per Grade Pay	
Dep :									Reimbursement for Hotel / Guest House Accommodation	
Arr :									@ Rs. _____ per day	
Dep :									From _____ To _____	
Arr :									(Total No. of days _____)	
Dep :									Reimbursement of Travel charges within the city i.e. AC Taxi / Non AC Taxi/Local Taxi/Auto Charges	
Arr :									@ Rs. _____ Per day	
Dep :									From _____ To _____	
Arr :									(Total No. of days _____)	
Dep :									Reimbursement of food bill not Exceeding Rs. _____ per day	
Arr :									From _____ to _____	
Dep :									(Total No. of days _____)	
Arr :										
Expenses on freight, cooly charges, etc.							Amount			
Details of Halts and Spells of Leave availed										
Tour Sation where halted/leave availed	From Date & Time		To Date & Time		Name of Hotel	Lodging charges per day Rs.	Total charges paid Rs.			
Halt :										
Leave :								Payment desired by :		
							Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>	Asstt. Acct. A. A. C.	
								Accounts Officer		
								PAY ORDER		
Enclosures								Certified that :		
								1. The above information furnished by me is correct.		
								2. The above entitlements have not been claimed from any other source.		
								3. I did not avail of any free board / lodge for days for which DA is claimed		
								4. I did not perform road journeys by taking single seat in public conveyance for journeys for which mileage is claimed under SR 46.		
								Signature _____		
Countersigned :								Controlling Officer		
								(DA) P & A O		
Head of Account :								If paid through cheque :		
								Cheque No. _____ Date : _____		