

## BOARD OF INTERMEDIATE & SECONDARY EDUCATION KOHAT Bannu Road (Near Indus Highway Junction) Kohat. Ph # 0922-554619, 554620, 554621 Fax # 554622

Before filling the Bill form, please study the rules

carefully on the back side of this form.

Stamp if the amount exceeds Rs.100.

## **TRAVELLING ALLOWANCE BILL**

Name:	Name: Designation:															Certified that	
Net Pay (Excluding Allowances): or Declared Income: Purpose of Journey:												of					
NB. Practica	Examiners v	vorking as	one of the S	Gupervisory	Staff sho	uld submit	their claim in	one TA	Billwit	h Duplicat	te Bill will not	be enterta	 ined.				Worked as
Particulars of Journey							rney by Rail	or Bus		K.M by Road at Paisa per K.M		Daily Allowance at  Rs Per day		Total		At	
Departure			Arrival			Class & Rate of Number single fare of Fares Rail/Bus		Amount		No. of K.M	•	No. of K.M	Amount		Amount		To
Station	Station Date	Hour	Station	Date	Hour			Rs.	Ps.				Rs.	Ps.	Rs.	Ps	On
																	Asstt Supdt Asstt. Controller/Secretary  Declaration:  1. I hereby certify that I have actually travelled by for which I have claimed T.A.  2. Certified that I have actually attended meeting on  3. Certified that Tanga charges of Rs were actually paid by me (receipt attached).  4. Certified that I am class office rand I am entitled to draw class travelling
	GRAND TO	TAL															allowance in my department.
Space for A	Audit					NE	Pay sli  2. Non-g  Certifi  is drav	p prior azetted ed that wing bas	sanction staff romagnetic staff romagnetic staff staff romagnetic staff staff romagnetic staff romagne	on of the (may subm	by car must so Chairman for it the following	use of persong certificate	onal car i e:	is must. 			Signature Address  Received Payment  Signature  Fifteen Paisa Revenue Stamp to be affixed here if the amount exceeds Rs.20 and Forty Paisas Rs.