

TRAVELLING ALLOWANCE BILL

BOARD OF INTERMEDIATE & SECONDARY EDUCATION, GUJRANWALA (T.A./D.A., Will be Paid According to the Provincial Govt. (Punjab) T.A., Rules)

DECLARATIONS

(NOT TO BE LEFT UN-SIGNED)

I hereby declare that;

- 1) This claim is not a source of earning and journey was performed in the interest of public service Board.
- 2) The stay during the intervening period at destination was necessary and I did not leave the place of duty/examination center during the period for which this allowance has been claimed whole of the journey in respect of this bill.
- 3) The class/mode actually traveled has been charge.
- 4) No traveling allowance for any part or the whole of the journey in respect of this bill has been drawn claimed by me from any other public source.
- 5) I am class.....Officer/Official and entitled to draw.....class traveling and halting allowance in my own Department/Organization.
- 6) The journey was performed by Road/Rail and the distance between.....and.....is.....Kilo meters by road which is the shortest route to reach the destination.
- 7) I traveled by my own/borrowed.....car/Motorcycle. The Registration Number of the Car/Motorcycle is.....

Name.....S/O.....Qualification.....Designation.....
(Capital Letters)

NIC No.....NTN.....Basic pay on the date of journey Rs.....

MODE OF JOURNEY

Purpose of Journey.....(Rail/Bus/own Car).....Basic Pay Scale No.....

PARTICULARS & ROUTE OF JOURNEY						Journey performed by Rail/Bus/B. Car/Own Car/Taxi			Daily Allowance At Rs.....per day		Total
DEPARTURE			ARRIVAL			CLASS AND NUMBER OF FARES	NO. OF KILO METERS	AMOUNT IN RUPEES	NO. OF DAYS	AMOUNT IN RUPEES	AMOUNT IN RUPEES
STATION	DATE	HOUR	STATION	DATE	HOUR						
1	2	3	4	5	6	7	8	9	10	11	12
GRAND TOTAL:											

ATTESTED

Applicant's Signature

Head of the Office

Duty as _____
Bill verified for payment _____ working days,
if permissible under the rules.

Dealing Clerk Supdt. ACS/ACC C.E.

FOR USE IN THE BOARD'S OFFICE

(FOR OFFICE USE ONLY)

Paid Rs. Rs. (in words) Head of Charge Cheque No. Date Asst./Dy. Secy. (Finance)	Head of Account Budget Allotment Rs. Amount of the Bill Rs. Upto date-expenditure..... including the amount of..... This bill. Rs. Balance available. Rs. Budge Clerk Superintendent
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RECEIVED PAYMENT

(Must be signed)
 Signature.....
 Identity/Center No.
 Full Address.....

**Rs.1 revenue
Stamp to be fixed
here up to
Rs.2000/-,
Rs.2/- if it exceeds
Rs.2000/- &
Rs.5/- if it exceeds
Rs.10,000/-**

SANCTIONED AND

Passed for payment of Rs. Rs. Asstt./Dy. Secretary (Finance)	Passed for payment of Rs. Rs. Auditor Audit Officer
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