

Indian Institute of Management Raipur

T.A./D.A. Claim Form/Bill

1. Name (*in Block Letters*) _____
2. Designation _____ 3. Basic Pay _____
4. Purpose of Journey _____

4. Travelling Allowance:

DEPARTURE			ARRIVAL			Mode of Journey *	Distance K.M.	Purpose	FARE (Rs.)@
Station	Date	Time	Station	Date	Time				
a	b	c	d	e	f	g	h	i	j
								Total	

* Air Tickets/E.Ticket/Train Ticket/Bus Ticket be enclosed alongwith TA/DA claim bill.

@ Please provide: In case of AIR a) Flight No., b) Class, c) Ticket No. TRAIN:_a) Train No., b) Class, c) Ticket No., BUS :_a)Ordinary/Deluxe/AC, b) Ticket No.

Travelling allowance C/F

Travelling allowance B/F (Total of A) Rs. _____

B. Daily Allowance:

Daily Allowance _____ days @ Rs. _____ Rs. _____

Daily Allowance _____ days @ Rs. _____ Rs. _____

C. TOTAL (A+B) Rs. _____

D. Honorarium for attending the Meeting) Rs. _____

E. GRAND TOTAL (C+D) Rs. _____

F. Advance if any Rs. _____

G. Balance (E – F) Rs. _____

DECLARATION/UNDERTAKING:

- i) I have actually travelled by the mode and class and T.A. has been claimed accordingly.
- ii) I will perform the journey by mode and class for which I have been paid advance by the institute.
- iii) I have not claimed TA/DA or any other allowance for this journey from any other source.
- iv) I was not provided free lodging, Boarding, Conveyance at the cost of Government/University or an Autonomous Body.
- v) Particulars given in the bill are true and correct.

Signature

Name : _____

Address : _____

Recommended by
(Where required)

Signature

Approval

Date

Chief Administrative Officer

Director

(FOR OFFICE USE ONLY)

PASSED FOR PAYMENT Rs. _____

(Rupees) _____

Received Rs.....by Cheque/Cash

Date:

Signature