

UNIVERSITY OF JAMMU

TRAVELLING ALLOWANCE BILL

Name..... Designation.....

Headquarters..... Address.....

Basic Pay..... D.A.....

Purpose of Journey.....

Departure/Stay		Arrival		Mode of Travel/ Name of Train/Air	Ticket No.	Details/ No. of Halts	AMOUNT	
Station	Date/ Hours	Station	Date/				Rs.	P.

Received payment and certified that :-

1. No free pass for this journey was availed.
2. The journey was undertaken in the interest of the University and the fare charged is correct.
3. I travelled by the class of accommodation for which T.A. has been claimed.
4. No Government/University conveyance was used.
5. No Free boarding and Lodging is provided by the University.



Gross Total _____
 Less advance drawn _____
 Net payment _____

COUNTERSIGNED BY _____ **Sig. of the claimant/Payee**

FOR USE IN ACCOUNTS BRANCH

Passed for Rs. _____ (Rupees.....)

by debit to _____

Assistant Registrar (Accounts)

Deputy Registrar (Finance)

Joint Registrar