Chaudhary Charan Singh Haryana Agricultural University T.A. Bill Form

Contd. Form AU 5/8

Assistant Registrar (A)/(E)/(G)/(E)

	ASS	istant Regis	strar (A)/(E)/(G)/(E)			
			Attested and paid			
Date of Examination/Meeting/Visit, verified						
For payment on the spot		Voucher No Cash Book Page No				
		Cashier	D. & DO.			
BUDGET PROVISION (* Allotment for the current year : Rs	To be filled in by Controlling C	-				
Amount of the present bill	(less advance pay	ment if any	·)			
Total of previous bills						
Total to date						
Balance available						
Passed for payment of Rs	(Rs)			
			Controlling Officer			
(FOR U	JSE IN AUDIT OFFICE)					
Pre-audited and passed for payment of Rs						
(Rs)			
Auditor/Senior Auditor/Assistant Examiner						
(FOR USE IN	I COMPTROLLER'S OFFICE)					
Vr. No	dated					
and expenditure classified.						

Accountant Asstt. Comptroller

CERTIFICATES FOR JOURNEYS ON TOUR/TRANSFER ETC.

	CERTIFICATES FOR JOURNETS ON TOORY TRANSFER ETC.
I.	ON TOUR CERTIFIED THAT:
1	, , , , , , , , , , , , , , , , , , ,
_	of Rs.
2	
3	
4	accommodation of which was reserved by me.
5	
6	
II.	ON TRANSFER
1-4	. Same as on tour
5.	Certified thattruck load of household goods were actually transported and actual
	charges were not less than those claimed in the bill and admissible under the rules.
6.	Certified that the family members for whom T.A. has been claimed are wholly dependent upon
	me residing with me, and accompanied me/followed/proceeded me as admissible under rules.
III.	FOR EXAMINERS/EXPERTS/MEMBERS OF BOM/FC
1-4	Same as on tour
5.	Certified that I shall perform the return journey by the same mode as claimed in the T.A. bill and
	shall refund within 15 days the excess amount if any, received by me. On the completion of this
	period it may be taken that there is no change in the particulars furnished in the T.A. bill and the
	responsibility for correctness thereof will be upon me.
6.	I declare that the railway return ticket was not available.
	Signature
*Plea	se sign at both the places.
	Pre-receipted (Received payment)

Note : Portion which is not applicable shown be deleted. Signature

(Affix 20 paise stamp)

Travelling Allowance Bill for the mont	h of

Name & Designation Pay/Declared Income for Non-Employees	Purpose of journeyDate of meeting/Examination
for T.A. purpose : Rs	T.A. Check Register Page No

Departure		Arrival			Mode of journey			Local mileage			Daily Allowance			Actual Expenses		Total Col. 10,		
Station	Date	Time	Station	Date	Time	Bus/Rail/Air.Car (staff) Own taxi	Km.	Class of Air/Rail travel	Amount (Rs.)	Km.	Rate	Amount (Rs.)	No. of Journey/ halting days	Rate (Rs.)	Amount (Rs.)	Particulars	Amount (Rs.)	13, 16 & 18 Rs.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19