

भारतीय प्रौद्योगिकी संस्थान भुवनेश्वर INDIAN INSTITUTE OF TECHNOLOGY BHUBANESWAR

Sub Bill No.	
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TA BILL FOR TRANSFER / RELOCATION

PART-A (To be filled by the Employee of the Institute)

					Total (A)				
Date Time	l Fr∩m	Date & Time	То	accommodation used	on of fares	Paid Rs.	for road Mileage	/ PNR No.	
I	Departure	Arrival		Mode of Trav	el No.	Fare	Distance in kms	Ticket No.	
7. De famil		(s) perfori	med by th	e Employee of th	e Institute	as well as	s members (of his/her	
JL.		me		Age	Relationship with the Employee				
6. Pa	articulars of the			nily as on date of		1			
		(b) New						
5.	Residential Address) Old						
) New						
4.	Headquarters	(a) Old						
3.	Basic Pay & Pay at the time of tra		asic Pay Rs.		_ Pay Le	/ Level			
2.	Designation & Of	ffice							
1.	Name								

SI. No.	Date	Name	of Place	Rs.
		From	То	
L			Total (B):	

Transportation of	Date	Mode of Transport	Station		Weight in kgs.	Rate Rs.	Amt.	Invoice No.	Date	Issuing Authority
			From	То						
Personal Effects										
Conveyance										

10. (Composite	Transfer	Grant	(if ap	plicable):	Rs	
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11. Total amount claimed (Col 7A + 8B + 9C + 10): Rs.

SELF DECLARATION CERTIFICATE

- (i) The information as given above is true to the best of my knowledge and belief.
- (ii) I further declare that I have neither claimed nor I will claim part of full of this claim for this journey form any other source/office.
- (iii) I and the members of the family in respect of whom the claim is submitted have indeed travelled upto the declared place of visit.
- (iv) I / My family was neither allowed free transit by rail under free pass nor otherwise provided with means of communication at expenses of the state or Local Bodies journey for which TA has been claimed in the bill.
- (v) I did not perform the road journey for which the kilometre allowances has been claimed at the higher rates prescribed in SR 46 by taking a single seat in taxi motor or mini bus or lorry plying for hire.
- (vi) I hereby undertake that I will refund the full amount of relocation charges if I leave the Institute before 3 years.

Date: Signature of the Claimant

Supporting documents to be enclosed:

- 1. Tickets
- 2. Boarding Pass
- 3. Copy of the Offer of Appointment Letter and Joining Office Order
- 4. Invoice with money receipt for transportation of Personal Effects
- 5. Invoice with money receipt for transportation of Personal Conveyance

PART- B [To be filled by Establishment-I (Faculty)/ Establishment- II (Non-Teaching)]

1.	Joined on Technical Resignation (Yes / No) :
2.	No .of Dependents (including self) eligible for Travel Reimbursement as per Para No.6 :
3.	TA reimbursement to be settled as per: Fresh Joinee
	Or
	Technical Resignation

Signature of the Dealing Asst./Supdt.

DR/AR (Estt-I/Estt-II)

Date:

PART-C (To be filled in by the Bill Section)

Т	he net entitlement on account of Travelling allow	vance works out to Rs	
(Rupees .			only) as detailed below:
SL. No.	Particulars	Amount claimed (in Rs.)	Amount admitted (in Rs.)
	Fare Admissible		
Α	(i) Air		
A	(ii) Railway		
	(iii) Bus		
	(iv) Steamer		
	Total:		
В	Road mileage forkm.@ per/km		
С	Transportation of personal effects		
D	Transportation of Conveyance		
E	Transfer Grant		
F	Gross amount (A+B+C+D+E)		
	Net amount:		
the claima	(Rupeesant as per the entitlement worked at above.		Only) to
Dealing A	Asst./Supdt. AR/DR (F&A)		Signature of DDO
	Countersi	<u>gned</u>	

Controlling Officer

Date: