



**TRIPURA UNIVERSITY**  
**(A Central University)**  
 Suryamaninagar-799022

**Travelling Allowance Bill (Official/Academic/Home)**

Name and Designation	Head quarter	Basic Pay & Grade Pay	PARTICULARS OF JOURNEY				RLY/AIR/TAXI FARE			ROAD MILEAGE			DAILY ALLOWANCES		TOTAL
			Departure		Arrival		No. of K.M.	Mode of Journey	Amount	No. of K.M.	Mode of Journey	Amount	Rate	Amount	
			Station	Date & Time	Station	Date & Time			Rs.			Rs.			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
							GRAND TOTAL								

**Advance :**

(Vide Advanced Register Page .....)  
 Passed under Voucher No..... dated..... Rs.....  
 Net Sum required for payment .....

B.I ..... Voucher No .....

C.R.P No ..... Cash Book Folio No .....

Cheque No ..... Ledger Folio No .....

TRIPURA UNIVERSITY  
SURYAMANINAGAR

T.A Bill for the purpose of .....

.....

Full Name (in block letter) .....

Address of the place of employment .....

Present Address .....

Residential Address .....

Signature .....

Complete Address for correspondence

.....

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DECLARATION

I hereby declare that the amount as claimed in the bill was solely and fully incurred by me for the purpose of the travel to and from by normal residence and exclusively for the specific purpose and no part of it has been borne by any other person/organization for the purpose for which this bill has been made.

Signature .....

RECEIVED PAYMENT

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( For use of the Office )

Passed for Rs. .... (Rupees .....

.....) only.