DEVI AHILYA VISHWAVIDYALAYA, INDORE (T. A. BILL FOR SPORTS)

		Total			ild be paid by
dress	The state of the s	D. A. admissible for no. of days with dates	Amount		Total rectually paid/wo. sich T. A. is clair Signature
	The Local Control of the Control of		Days and Dates		ny other source. is claimed was a tinan that for wh †
	The second of th	Special Management Allowance			Total I Certify that I have not drawn T. A. or D. A. in this connection from any other source. I certify that I have travelled/would travel by the class for which T. A. is claimed was actually paid/would be paid by me and that in the event of my travelling by a means or in a class other tinan that for which T. A. is claimed resulting in a saving I would refund the difference to the University. * Signature re on Re. 1/- revenue stamp is necessary if claim exceeds Rs. 500/.
Designation/Address	AND THE PARTY OF T	Honararium for Selection Committee			 I Certify that I have not drawn T. A. or D. A. in this connection from I certify that I have travelled/would travel by the class for which T me and that in the event of my travelling by a means or in a class to a saving I would refund the difference to the University. Recd. R.*. *Signature on Re. 1/- revenue stamp is necessary if claim exceeds Rs. 500/.
	AND AND THE PERSON OF THE PERS	Distance Km.	CHARLES SALES		e not drawn T. A. o e travelled/would tre event of my travelli sfund the difference
	CONTRACT CON	Rlv /Bus Fare			1. I Certify that I have not draw 2. I certify that I have travelled me and that in the event of m a saving I would refund the d Recd. Rs. *Signature on Rc. 1/- revenue stamp is
	Year of the DDDDD and the DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD	Purpose of Journey			1. 2. Recd. R. *Signatu
		Place	To		S; AMP
			From	,	
		Hour(s) of	Arrival		
			Departure		
9		Date(s) of Journey	1		use only
Name	Headquater	Daters	Departure		For Office use only

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