

TOUR REPORT

SUBJECT:-REGARDING REVIEW MEETING ON 5 JANUARY 2018
JAIPUR.

Tour id :-5923

PROJECT NAME:-street light national programme (SLNP)

PROJECT CODE:-STL-2016-RJ-JAIP

NAME:-Ganpati jha

EMPLOYEE CODE:-NC07031

DESIGNATION:-Engineer

PERIOD:-5 -01-2018

PERSON TO CONTACT:-MR Girja Shankar &all Rajasthan team.

VENUE :-Jaipur office

PURPOSE OF TOUR:- Regarding Review Meeting ON 5 January 2018.

Tour Id: 5923

Tour Allowance Claim Form for UP, Executives

ENERGY EFFICIENCY SERVICES LIMITED
TOUR TRAVELLING ALLOWANCE CLAIM

Date: 22/01/2018

CARD CODE	EMPLOYEE NO.	TOUR COMMENCEMENT DATE	NO. OF DAYS Tour	1 days	DESTINATION
Name	Designation	Scale of Pay	Basic Pay		
SL- Razaabham	employee	E1	22,216		
Department	H.O.				

Section II: Calculation of total TA admissible

Note: Cheque drawn in favour of Energy Efficiency Services Limited if net claim is negative.

FOR ACCOUNT'S DEBIT

	Amount Claimed (to be filled in by the employee)	Amount admitted by Accounts (enter only if claims are claimed tickets, booked by company or Cheque Amount)	Remarks
Section I			
1. Journey Rates			
By Air			
By Rail & Road	by Road 240		
	Cost of Ticket Dr.		
2. Conveyance charges			
B- Boarding & loading charges	750		
A. Total	990		
Less Advance drawn from			
C. NET CLAIM	990		

Pay () Net Claim

Recover ()

D. Refund by cheque

Cheque No. _____ Dated _____
on _____ for _____

Accounts Officer

*The cancellation of booking was due to official reasons

Signature of Head of Department
Name _____
Designation _____

*To be furnished when cancellation charges are claimed

SECTION 1: JOURNEY DETAILS (Please indicate Ticket No. or attach M/R wherever fare claimed is for other than hind Class and for air journey and bus journey enclose used ticket/folders)						
Model	Train	Purpose of	Amount	Ticket No./MR No./Bus Ticket	Remark	

* Note: Where tickets are provided by the company the fare may be indicated in remarks column.

NOTE: Please enclose the supporting bill / declaration
received (if any) at [] from []

CERTIFICATE:

CERTIFICATE:
Certified that I was physically present at the touring station as above for the indicated days.

Counter signed

Signature _____

(Name & Designation of the Controlling officer)

Ampali
Signature of Employee

Date: 22/01/2018

Tour Id : 5323

Tour Allowance Claim Form for Jt. Executive

BILL/CERTIFICATE
for Boarding/Lodging Charges

Certified that I have incurred expenditure of about less than Rs. 330 towards
boarding/lodging expenses during the 05-01-18 to 05-01-18 date of calendar month
22/01/2018

Name Umapati Thor

Designation engineer

Tour Id - 5923

ENERGY EFFICIENCY SERVICES LIMITED

TOUR APPROVAL FORM

Details of the Employees proposing to undertake the tour:

Name	Designation	Emp. No.	Department
Bhambhani Jha	Engineer	0/162	Street Light

Details of the Tour:

1	Project Name	Jaipur
2	Complete address of the place(s) to visit	Regional Office, Jaipur
3	Contact Person	Mr. Bireja Shankar and Anamika Kataria
4	Purpose of the Tour	Review meeting on 5 January 2018.
5	Proposed period of tour	1 day

Details of the Movement:

Sl. No.	Date of Travel	Train / Flight Name & No.	Station		Class	Remarks
			From	To		

Date: 22/01/2018

Stampali
Signature of the Employee

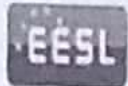
Comments of the Controlling Officer

Comments of the HQD

Tour Approved / Not Approved

Signature of the MD (RES)

For submission / presentation as per rule



Tour Id = 5923.

		SUBJECT: Street Light Project
TOUR REPORT		REF:
DISTRIBUTION	NAME(s): Vianpati Jha	
1. Mr. Girja Shankar	PERIOD: 01 days	
2. Mr. Aman Meherda	MEETINGS: Review meeting on 5 January 2018 Jalpur.	
	VENUE: Regional office Jalpur.	
	MAIN PERSONS CONTACTED: Mr. Girja Shankar and Aman Meherda.	

BRIEF SUMMARY:

As per as the guidance of Mr. Girja Shankar Sir I reached Jalpur to attend the meeting on date 05-01-18 regarding maintenance issues and other problem with all the vendors of Rajasthan SLNP Project.

Follow-up Items

CLASSIFICATION:	SIGNATURE (S)	SUPERVISOR
<input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/>		SIGNATURE
RESTRICTED		