

ENERGY EFFICIENCY SERVICES LIMITED
TOUR TRAVELLING ALLOWANCE CLAIM

Date:-

CARD CODE	EMPLOYEE NO.	TOUR COMMENCEMENT DATE	Mth/Days Tour	DESTINATION
	NC06999	26 Dec 2017		Agra
Name	Designation	Scale of Pay	Basic Pay	
Rahul Sharma	Assistant			
Department	H.O.			
Tech.	NOIDA			

Section I : Calculation of total TA admissible

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

Section-I	Amount Claimed (to be filled in by the employee)([₹])	FOR ACCOUNTS DEPTT.									
		Amount admitted by Accounts (enter only if claims are claimed ticket, booked by company or Cheque Amount([₹]))									
1. Journey Fares											
By Air	0										
By Rail & Road	259										
	Cost of Ticket Dr.										
2. Conveyance charges	720										
3- Boarding & loading charges	2000										
A. Total	2979										
Less Advance drawn from:											
C. NET CLAIM	2979/-										

Pay ([₹])..... Net ClaimRecover ([₹]).....

D. Refund by cheque

Cheque No..... Dated

for

([₹]).....

on

Accounts Officer

*The cancellation of booking was due to official reasons

Signature of Head of Department

Name

Designation

Name

*To be furnished when cancellation charges are claimed

Tour Allowance Claim Form for UPL Executives

SECTION I : JOURNEY DETAILS (Please Indicate Ticket No. or attach M/R wherever fare claimed is for other than IInd Class and for air journey and bus journey enclose used ticket/folders)

Departure			Arrival			Model & Class of travel	Train No./ Train Name	Purpose of Journey (Please give details)	Amount Claimed (₹)	Ticket No./MR No./Bus Ticket No.	Remarks
Date	Time	Station	Date	Time	Station						
26/12	8 AM	N. DELHI	26/12	12 PM	AGRA	Bus		official	0		
29/12	5 PM	AGRA	29/12	9 PM	N. DELHI	Bus	—		259/-		

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

SECTION II : DETAILS OF CLAIM FOR Boarding /Lodging

Midnight (00hrs) spent	Station	No. of days	Slab Rates	Boarding & Lodging charges
	AGRA	4	500	→ CAA
Total			2500/-	Total

NOTE : Please enclose the supporting bill /declaration

1. Leave availed (if any) at from to

SECTION III : DETAILS OF CONVEYENCE CHARGES CLAIMED

NOTE: If the space provided is insufficient, separate sheet in the same Performa may be attached duly signed by the claimant.

Sl No.	Date	Station	Place of Visit (specify Locality)		Distt. In Kms. (approx)	Amount	Amount	Purpose (in brief)	Station-wise weekly total
			From	To		Means of Travel	(₹)		
1.	26/12	AGRA	station	site	Auto		180		
2.	26/12	"	site	ANN	"		80		
3.	26/12	"	ANN	site	"		80		
4.	27/12	"	site	ANN	"		150		
5.	27/12	"	ANN	site	"		150		
6.	28/12	"	site	site	"		50		
7.	29/12	"	site	ANN	"		80		
8.	29/12	"	ANN	station	"		50		
						Total	820/-		

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)

Signature of Employee

Date: