ENERGY EFFICIENC	CY SERVICES LIMITED	Form for UPL Executiv			
TOUR TRAVELLING	ALLOWANCE CLAIM	Date:- 14/61	118		
CARD CODE NEMPLOYEE NO	TOUR COMMENCEMENT D	T DATE Mth/Days Tour		DESTINATION	
Name Duty	Designation Statisfy	Scale of Pay	Ва	asic Pay 28,082)	
Department S.1	H.O	roid 9			
Section 1: Calculation o Note : Cheque drav	of total TA admissible vn in favour of Energy Efficiency				
	Amazona Clairead	Amount Claimed (to be filled in by the employee)(') Amount admitted by Accounts (enter only if claims are claimed ticket, booked by company or Cheque Amount(')		COUNTS DEPTT.	
Section-1 1 Journey Fares	(to be filled in by the			Remarks	
By Air					
By Rail & Road	1363 -				
2	Cost of Ticket Dr.				
Conveyance charges Boarding& loading charges	1201-				
to ording x to during thanges	7501-				
A Total	7501-				
Less Advance drawn from:					
C. NET CLAIM	2263/—				
		Pay (`)		Net Claim	
D. Refund by cheque Cheque No	Dated	Recover ()		
on	for(')			Accounts Officer	
*The cancellation of book	ing was due to official reasons				
		Name	Signature of Name Designation	Head of Department	
*To be furnished when ca	incellation charges are claimed	1			

Tour Allowance Claim Form for UPL Executives

SECTION 1: 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) Ticket No./MR Departure Model Train Purpose of Arrival Remarks Amount & Class No./ Journey No./Bus Ticket Time Claimed Date Station Date Time Station of Train (Please give No. Name details) travel 4/1/189:001M SGNR 5/1/18 05:30 AM Jaifyx 680 SILLIPIO: 15th (MIRE OUILIZOG: ON SUNR BUD *Note: Where tickets are provided by the company the fare may be indicated in remarks column. SECTION II: DETAILS OF CLAIM FOR Boarding /Lodging Boarding & Lodging charges Midnight Slab (00hrs) spent Station No. of days Rates 25h15 Jaker 750 /-(CDA) (CDA) -102F NOTE: Please enclose the supporting bill /declaration to 1. Leave availed (if any) at 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. Place of Visit Station-Distt. In Means of Amount (specify Locality) Purpose (in brief) wise weekly Station Kms. SI No. Date Travel (,) total (approx) To From Auto 41118 SUNR Home 201-5KM 301-Auto FKM 301 Auto 8KM 118 Jaily Meet & R. Office 6KM 201 Auto K-office B. Stop 301 Auto 8 KM 201 Auto 120 Total CERTIFICATE: Certified that: I was physically present at the touring station as above for the indicated days. Counter signed Signature (Name & Designation of the Regional OfficeIn charge/BUH) Signature of Employee

BILL/CERTIFICATE For Boarding/Lodging Charges

Certified that I have incurred expenditure of not less than Rs. 2263 — towards boarding/lodging expenses while on tour for 01 days of calendar month 3 number 2018 as per tour programme/s.

Name- Symit Kr- Dutta

Designation- St-Engg