Tour Allowance Claim Form for UPL Executives

| 1                                                                                                                                           | NERGY EFFICIENCE<br>R TRAVELLING |                                                           | Date:- 18/10/17 |      |                                                  |                    |                    |                                                    |        |                |        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------|-----------------|------|--------------------------------------------------|--------------------|--------------------|----------------------------------------------------|--------|----------------|--------|--|
|                                                                                                                                             | NC06950                          | 28/10/17                                                  |                 |      | 2                                                |                    |                    |                                                    | \$3.00 | a, Delhi (NCR) |        |  |
| CARD<br>CODE                                                                                                                                | EMPLOYEE NO.                     | *                                                         |                 |      | ATE                                              |                    |                    |                                                    |        | DESTINATION    |        |  |
| Name Pisalkar                                                                                                                               |                                  | Designation                                               | Gng incer       |      |                                                  | Scale of Pay       |                    | CI.                                                |        | Basic Pay      | 22,400 |  |
| Departmo                                                                                                                                    | ent SLNP                         | 1000                                                      | н.о             | 1    | Void                                             | La,                |                    |                                                    |        | •              |        |  |
| Section I: Calculation of total TA admissible  Note: Cheque drawn in favour of Energy Efficiency Services Limited if net claim is negative. |                                  |                                                           |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
|                                                                                                                                             |                                  |                                                           |                 |      |                                                  |                    |                    | 25 CROM CON 1000                                   |        | S DEPTT.       |        |  |
| Section-I                                                                                                                                   |                                  | Amount Claimed<br>(to be filled in by the<br>employee)(`) |                 |      |                                                  | er only<br>cet, bo | y if clai<br>ooked | ed by Acco<br>ms are clai<br>by compan<br>mount(`) | med    | Remarks        |        |  |
| 1. Journe                                                                                                                                   |                                  |                                                           |                 |      |                                                  | T                  |                    |                                                    |        |                |        |  |
| By Air<br>By Rail & Road                                                                                                                    |                                  | 8,7451-                                                   |                 |      |                                                  |                    |                    |                                                    |        | -              | ui -   |  |
|                                                                                                                                             |                                  | Cost of Ticket Dr.                                        |                 |      |                                                  |                    |                    |                                                    |        |                | ,      |  |
| 2. Conveyance charges                                                                                                                       |                                  | 1507  -                                                   |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
| 3- Boarding & loading charges                                                                                                               |                                  | 36,0001-                                                  |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
| A. Total DA Charges!                                                                                                                        |                                  | 12,0001-                                                  |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
| Less Adva                                                                                                                                   | nce drawn from:                  | 17,71                                                     |                 |      |                                                  |                    |                    |                                                    | 8      |                |        |  |
| C. NET CLAIM                                                                                                                                |                                  | 40,4631-                                                  |                 |      |                                                  |                    |                    |                                                    |        |                | 5      |  |
|                                                                                                                                             |                                  |                                                           |                 |      |                                                  |                    | Pay (`)            |                                                    |        | Net Cl         | aim    |  |
| D. Refund by cheque Cheque No Dated .                                                                                                       |                                  |                                                           |                 |      |                                                  |                    | Recover (`)        |                                                    |        |                | A      |  |
| on for () Accounts Officer                                                                                                                  |                                  |                                                           |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
| *The cancellation of booking was due to official reasons                                                                                    |                                  |                                                           |                 |      |                                                  |                    |                    |                                                    |        |                |        |  |
| · · · · · · · · · · · · · · · · · · ·                                                                                                       |                                  |                                                           |                 |      | Signature of Head of Department Name Designation |                    |                    |                                                    |        |                |        |  |
| *To be fu                                                                                                                                   | urnished when can                | cellation char                                            | ges are cla     | imed |                                                  |                    |                    |                                                    |        |                |        |  |

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

| Departure Arrival Model Train Purpose of Ticket No. /MP                                                                                                                            |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------|----------------------|---------------|---------|-------------|---------------|---------------|---------------|----------------------------|-------------------|-----------------|-----------|
| Departure                                                                                                                                                                          |                                                                                           |             | <sub>,</sub> Arrival | 940914049600  |         |             | Train         |               | oose of       | Amount                     | Ticket No./MR     | _               |           |
| Date                                                                                                                                                                               | Time                                                                                      | Station     | Date                 | Time          | Station |             | class<br>of   | No./<br>Train |               | urney<br>ase give          | Amount<br>Claimed | No./Bus Ticket  | Remarks   |
| Date                                                                                                                                                                               | Tillie                                                                                    | Station     | Date                 | IIIIde        | Station |             | avel          | Name          |               | etails)                    | (`)               | No.             |           |
| 27/19/17                                                                                                                                                                           | 6am                                                                                       | Mombil      | 27/09/18             | FPM           | Nagpu   | _           | AC            | 12859         |               |                            | 21451-            | 8419414225      | Nak       |
| 28/03/4                                                                                                                                                                            |                                                                                           | Nagpun      |                      |               | Delhi   | 21          |               | 22415         | fran          | elling                     | 24951-            | 6506387-230     | - Fichers |
| 17/10/17                                                                                                                                                                           |                                                                                           | Delhi       | 18/10/17             |               | Mombe   |             |               | 12952         | 80            | HO,                        | 41051-            | 242689050       | attached  |
| rinopir                                                                                                                                                                            | Opine                                                                                     | ioci o      | 1000                 | 60011         |         |             | , -           | 12002         |               |                            |                   | 212683000       | <b>"</b>  |
| *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<br>(00hrs) spent                                                                                                                                                          |                                                                                           |             | Station              | ation         |         | No. of days |               | Slab<br>Rates |               | Boarding & Lodging charges |                   |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
| 20days.                                                                                                                                                                            |                                                                                           |             | Noida (NCR)          |               |         | 20days.)    |               |               | c 6001-       |                            | 18800 -           |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             | y             |               |               | (                          | )                 | ζ               | • n       |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               | 12,0001-      |                            | 36,0001-          |                 |           |
|                                                                                                                                                                                    |                                                                                           |             | Total                |               |         |             | DA            |               | 12,000/-      |                            | Total 36,0001     |                 |           |
| NOTE :                                                                                                                                                                             | 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. |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
| NOTE:                                                                                                                                                                              | If the sp<br>I                                                                            | ace provide |                      |               |         | sheet       | in the        | same Per      | forma         | may be a                   | ttached duly      | signed by the c | aimant.   |
|                                                                                                                                                                                    |                                                                                           | 7 4         |                      | ifu Localitus |         | istt. I     | 111           |               |               | a cunt                     |                   |                 | Station-  |
| SI No.                                                                                                                                                                             | No. Date Stati                                                                            |             | Station              | T LOCAL       | /       |             | S. Travel     |               | nount Purpose |                            | e (in brief)      | wise weekly     |           |
|                                                                                                                                                                                    |                                                                                           |             | From                 | T             | 0 (8    | ppro        | <sup>()</sup> |               |               | ( )                        |                   |                 | total     |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   | _               |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               |               |                            | Joshed_           |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             | -             | _             |               | . 0                        | foe               |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               | de            | et                         |                   |                 | 14        |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               |               |               | 7                          |                   |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      | 1             |         |             |               |               |               |                            |                   |                 |           |
|                                                                                                                                                                                    |                                                                                           |             |                      |               |         |             |               | +al           |               |                            |                   |                 |           |
| Total CERTIFICATE:                                                                                                                                                                 |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
| Certified that: I was physically present at the touring station as above for the indicated days.                                                                                   |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
| Counter signed                                                                                                                                                                     |                                                                                           |             |                      |               |         |             |               |               |               |                            |                   |                 |           |
| Aufur A                                                                                                                                                                            |                                                                                           |             |                      |               |         |             |               |               | )             |                            |                   |                 |           |
|                                                                                                                                                                                    | Signature (Name & Designation of the Regional Office In charge/BUH) Signature of Employee |             |                      |               |         |             |               |               |               |                            |                   |                 |           |

## BILL/CERTIFICATE For Boarding/Lodging Charges

| Certified that I have incurred expenditu      | re of not less than Rs. | 58,2521-   | towards |
|-----------------------------------------------|-------------------------|------------|---------|
| boarding/lodging expenses while on tour for _ | 20 days days of cale    | ndar month | 2016    |
| as per tour programme/s.                      | •                       |            |         |

Name- Eshwar Pisalkar.

Designation- Engineer,

31 A.