

## भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

## **INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI**

FORM - 12

Note:

## FINAL BILL FOR LEAVE TRAVEL CONCESSION

Home Town / Anywhere in India (Delete which is not applicable)

BLOCK YEAR.....

1. This bill is to be submitted to Accounts Section.

				PART :	<b>- А</b> (то в	E FILLED IN	BY THE EN	1PL0	OYEE)					
1.	Name	e of the em	ployee	:										
2.	Designation				:									
	Dept.	/Section/Co	entre	:										
3.	Partic	culars of pe	erson(s) in	respect of w	hom LTC	has been	claimed fo	r:						
SI	Name			Age	Relationship with		Travelling (place)					Remarks		
No					the IITG staff		From		To Back (Yes/No)					
l.	Detai	ls of journe	y(s) perfor	med by the	person(s	) named al	oove:							
т:	aleat	Departure		Arrival		Distance					re paid		Domorto	
Ticket details		Date & Time	From	Date & Time	То	in Kms.	travel & Class	fa	fares Rs			P.	Remarks	
· which	btained													
For Travel for which tickets were obtained from *ATA														
or travel by rail / road & air	or which tickets were not obtained from *ATA													

<sup>\*</sup> ATA: Authorized Travel Agent

6. Particulars of journey (s) for which higher class of accommodation than the one to which the IIT staff is entitled:    Place	5.		•			)	`					
From   To   Conveyance   which entitled   which actually travelled   Frees   Rs.   P.	6.	Particulars of journey (s) for which higher class of accommodation than the one to which the IIT staff is entitled:										
7. Particulars of journey (s) performed by road between places connected by rail:    Name of places		Pl	Mode of				No. o	of	Fare paid			
Name of places   Class to which entitled   Rail fare   Rs.   P.		From To		conveyance	)	which entitled		fares	S	Rs.	P.	
Name of places   Class to which entitled   Rail fare   Rs.   P.												
Name of places   Class to which entitled   Rail fare   Rs.   P.	7	Particulars of i										
I declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I undertake to refund the amount in full in one instalment, if at any time, it is found that the LTC claimed by me for self and for the persons mentioned above is not admissible.  Date:    Signature of the employee   Emp_No:	٠.	Tarticulars or j	• • • • • • • • • • • • • • • • • • • •		DOW	·	<u> </u>		Rail fare			
refund the amount in full in one instalment, if at any time, it is found that the LTC claimed by me for self and for the persons mentioned above is not admissible.  Date:		From		5.550 to minor original								
refund the amount in full in one instalment, if at any time, it is found that the LTC claimed by me for self and for the persons mentioned above is not admissible.  Date:												
Signature of the employee  Emp_No.:  PART-B (To be filled in by the Finance & Accounts Section)  1. The net entitlement of account of leave travel concession are as detailed below:  (a) Railway/Air/Bus/Steamer fare : Rs	refu	nd the amount	in full in one in	nstalment, if at								
PART-B (To be filled in by the Finance & Accounts Section)  1. The net entitlement of account of leave travel concession are as detailed below:  (a) Railway/Air/Bus/Steamer fare : Rs	Date	e:										
PART-B (To be filled in by the Finance & Accounts Section)  1. The net entitlement of account of leave travel concession are as detailed below:  (a) Railway/Air/Bus/Steamer fare : Rs												
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(a) Railway/Air/Bus/Steamer fare : Rs			PART-E	(TO BE FILLED	) IN E	BY THE FINANCE	& Accounts	SECTIO	ON)			
(b) Less amount of advance drawn : Rs	1.	The net entitlem	ent of account	of leave travel	conc	ession are as d	letailed below:					
(c) Net amount : Rs	(	a) Railway/Air/Bus/Steamer fare			:	Rs						
(In words :Rs		(b) Less amou				Rs						
2. The expenditure is debitable to		(c) Net amour				Rs						
Signature of Dy. Registrar/Asst. Registrar (F&A)  Signature of Dy. Registrar/Asst. Registrar (F&A)  Signature of the Director / DOFA / Registrar  Certified that necessary entries regarding the LTC claims as above are made in Service Book of		(In words:	Rs							)		
Signature of Dy. Registrar/Asst. Registrar (F&A)  Signature of the Director / DOFA / Registrar  Certified that necessary entries regarding the LTC claims as above are made in Service Book of	2.	The expenditure	e is debitable to									
Signature of Dy. Registrar/Asst. Registrar (F&A)  Signature of the Director / DOFA / Registrar  Certified that necessary entries regarding the LTC claims as above are made in Service Book of												
Signature of the Director / DOFA / Registrar  Certified that necessary entries regarding the LTC claims as above are made in Service Book of								5	Signature	of the Bill /	Assistant	
Certified that necessary entries regarding the LTC claims as above are made in Service Book of	Sigr	nature of Dy. Re	gistrar/Asst. Re	egistrar (F&A)								
							Signati	ure of the	e Director	/ DOFA / I	Registrar	
Dr./Mr./Ms	Cer	tified that neces	sary entries reg	garding the LTC	clai	ms as above a	re made in Ser	vice Boo	k of			
	Dr./	Mr./Ms										