**Form: R7**

**INDIAN INSTITUTE OF TECHNOLOGY INDORE**

**TRAVELLING ALLOWANCE /CLAIM FORM**

(To be printed on back of Form R6)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.Name of the Applicant**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **2.Designation & Discipline/Unit** :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**3.Pay level**:\_\_\_\_\_\_\_\_\_\_\_  Institute Name (In case of external members)…….............................………..………………………………………  Budget Head (to which TA/DA is to be debited)………..……………..........…………….........................… | | | | | | | | | | | | | | | | | | | | | | |
| Amount of advance drawn, if any ......................................................Tour report : Enclosed/Not enclosed | | | | | | | | | | | | | | | | | | | | | | |
|  | |  |  |  | |  | | | | |  | | | | | |  | | |  | | |
| **4. Claimed fares(Air /Rail/ Bus) (Copy of tickets and boarding pass, where applicable, be enclosed):** | | | | | | | | | | | | | | | | | | | | | | |
| **Departure** | | | **Arrival** | | **Mode & Class of Journey**  **(Rail/ Road/ Air & IAC/II AC/ II AC/ Economy etc.)** | | | | | | | | **Train /Flight No. & PNR No.** | | | | | **Fare** | | | | |
| **Place** | | **Date & Time** | **Place** | **Date & Time** | **(Rs)** | | | | |
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|  | |  |  |  |  | | | | **Total Fare (Rs)** | | | | | | | | |  | | | | |
|  | | | | |  | | | |  | | | | |  | | | |  | | | | |
| **5. Details of local conveyance charges:** | | | | |
| **Date** | **Station** | | **Place visited/travelled** | | **Distance (KM)** | | | | **Mode of Travel - Taxi/ Auto/Other** | | | | | **Fare (Rs)** | | | | **Remarks** | | | | |
| **From** | **To** |
|  |  | |  |  |  | | | |  | | | | |  | | | |  | | | | |
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|  |  | |  |  | **Total Local Conveyance** | | | | | | | | | **(Rs)** | | | |  | | | | |
| 1. Certified that I have travelled by the class and mode of conveyance as indicated above. 2. Certified that amount claimed above has been actually been spent by me. | | | | | | | | | | | | | | | | | | | | | | |
| **6. Reimbursement of hotel/food bills:** | | | | | | | | | | | | | | | | | | | | | | |
| **Sr. No** | | **Date** | **Hotel details** | **Amount (Rs)** | | **Sr. No** | | | | **Date** | | | | **Bill details** | | | | **Amount (Rs)** | | | | |
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|  | |  |  | **Total (Rs)** | | | | | | | | | | | | | |  | | | | |
|
| Reimbursement of meals/food charges while on official tour on will be made on declaration basis within applicable limit. | | | | | | | | | | | | | | | | | | | | | |  |
| **Signature of the Applicant** | | | | | | | | | | | | | | | | | | | | | |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | |  |
| (FOR FINANCE OFFICE USE) | | | | | | | | | | | | | | | | | | | | | |  |
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| Claimed Rs…………………………………………….. | | | | | |  |  |  | | |  |  | | |  |  |  | |  |  |  |  |
| Disallowed/Added Rs …………….………………………. | | | | | |  |  |  | | |  |  | | |  |  |  | |  |  |  |  |
| Passed for Rs ……………………….…..………………… | | | | | |  |  |  | | |  |  | | |  |  |  | |  |  |  |  |
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| Jr. Assistant Sr. Assistant/Superintendent AR/DR/JR Registrar | | | | | | | | | | | | | | | | | | | | | |  |