

BILL FOR REIMBURSEMENT OF CONVEYANCE CHARGES

Name of the Employee : _____ Designation : _____ Section : _____ Pay : _____

No.	Dating	From (Place)	To (Place)	Mode of Journey	Rate claimed	Amount	Remarks
SR. _____	_____	_____	_____	_____	_____	_____	_____

Total: _____

Total Rs. _____ (Rupees _____ only)

CERTIFIED THAT

I have actually travelled by the conveyance indicated in above. Some places visited are not connected by bus, train or a combination of the. The hiring of other conveyance was essential in public interest due to urgency of work. The conveyance hired was not shared with any body else, was shared with _____ Departmental conveyance was not available for the journey.

RECOMMENDED & COUNTERSIGNED

SIGNATURES

Head of Section/Incharge of Section

PASSED FOR PAYMENT OF Rs. _____ (Rupees _____ only)

SIGNATURE
Date: _____

DRAWING & DISPENSING OFFICER
DIRECTORATE OF OILSEEDS RESEARCH