**GOVT. COLLEGE OF ENGINEERING AND TECHNOLOGY, JAMMU**

**TA BILL FORM UNDER TEQIP-III**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **1.** | **Name and designation with Full official Address:** | | | | | **-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------** | | | | | | | | | | | | | |
| **2.** | **Type of Organization:** | | | | | **(Govt./Private /Govt. Aided)-----------------------------------------------------------------** | | | | | | | | | | | | | |
| **3.** | **Pay Scale and Present Basic Pay** | | | | | **-------------------------------------------------------------------------------------------------------** | | | | | | | | | | | | | |
| **4.** | **Whether Retired or Still in Service** | | | | | **(Retired/ Still in Service)--------------------------------------------------------------------** | | | | | | | | | | | | | |
| **5.** | **Email Address** | | | | | **--------------------------------------------------------------------------------------------------------** | | | | | | | | | | | | | |
| **6.** | **Aadhar No.** | | | | | **---------------------------------------------------------------------------------------------------------** | | | | | | | | | | | | | |
| **7.** | **Permanent Account No.(PAN)** | | | | |  |  |  | |  | |  | |  |  |  |  | |  |
| **8.** | **Contact No.(Mobile)** | | | | |  |  |  | |  | |  | |  |  |  |  | |  |
| **9.** | **Purpose of Visit/ Meeting** | | | | |  | | | | | | | | | | | | | |
| **10.** | **Date(s) of Visit/ Meeting** | | | | | **---------------------------------------------------------------------------------------------------------** | | | | | | | | | | | | | |
| **11.** | **Details of Journey (including from and to Residence/ Office and Airport/Railway Station etc.)** | | | | | | | | | | | | | | | | | | |
| **Date** | | **Departure** | | **Arrival** | | | | | | | **Mode of Journey** | | **Distance in Kms.** | | **Fare Paid (Air /Rail) Taxi etc.** | | | **Air/Rail Ticket No.** | |
| **From** | **Time** | **To** | | | | | **Time** | |
|  | |  |  |  | | | | |  | |  | |  | |  | | |  | |
| * **For Local travel /conveyance, Please provide the details on separate Sheet.** | | | | | | | | | | | | | | | | | | | |
| **12.** | **Whether Staying in Rented Accommodation (Hotel /Guest House) with Payment of Some Charges or Making own Arrangement without Paying any Charges (Strike Out whichever is not applicable). If staying in Rented Accommodation(Hotel/Guest House) with Payment of Some Charges, Please Specify:** | | | | | | | | | | | | | | | | | | |
| Boarding & Lodging Charges per day | | | | | ---------------------------------------------------------------------------------------------------------- | | | | | | | | | | | | | | |
| Duration of Stay in days | | | | | ---------------------------------------------------------------------------------------------------------- | | | | | | | | | | | | | | |
| Total Amount (Rs.) | | | | | ---------------------------------------------------------------------------------------------------------- | | | | | | | | | | | | | | |
| **(Please attach original Receipts of Hotel/Guest House)** | | | | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- |
| **13.** | **Name of College/ Institute/Organization Visited and the date of visits:-** | | |
| **S.No.** | **Date of Visit(s)** | | **Name of College/ Institute/ Organization Visited** |
| **1.** |  | |  |
| **2.** |  | |  |
| **3.** |  | |  |
| **14.** | **Certified that :** | | |
| 1. Particulars provided here with are correct and that I have not claimed TA/DA etc. for this journey from any other source. | | | |
| ii. I was not provided free lodging and / or boarding at the cost of Govt. / University or any Govt. aided body. | | | |
| **Certified that I am entitled to travel by Executive/Economy Class Air Travel in my Organization as per NPIU guidelines (strike out, if not applicable) and I shall perform the return journey from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by the mode as claimed in the TA Bill.** | | | |
| **Date:** | |  | **SIGNATURE OF CLAIMANT** |

**PART-II (TO BE VERIFIED BY INSTITUTE PROJECT DIRECTOR TEQIP/PRINCIPAL GCET)**

The Faculty/Staff member/Expert/Resource person of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_was invited/ visited

under the authority of controlling officer of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and his attendance/ participation

as above is confirmed

|  |  |
| --- | --- |
| Dated: | **SIGNATURE OF THE PRINCIPAL**  **WITH NAME** |
|  | ----------------------------------------------- |

**PART-III (FOR OFFICE USE ONLY)**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | DA\_\_\_\_\_\_\_ days@­­­­­\_\_\_\_\_\_\_ or Food Bill | Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Passed for payment for Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2. | TA | Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (Rupees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |
| 3. | Honorarium | Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4. | **Grand Total.** | **Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 5. | TDS @ 10%(-) | Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6. | **Net Amount to be paid** | **Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Verified that TA Bill has been entered in TA claim register on Page No.\_\_\_Bill No.\_\_\_\_\_\_Dated:\_\_\_\_\_\_\_\_\_ | | | |

**AAO DRAWING & DISBURSING OFFICER/ AO**

|  |  |
| --- | --- |
| **PAYEE’S RECEIPTS** | |
| |  | | --- | | **­Received Rs.-------------------------------(Rupees-----------------------------------\_\_\_\_\_\_\_\_**  **-------------------)Through PFMS in my Registered A/C No.-----------------------------------------------**  **-------------------------------Voucher No.----------------------------------------------or Cash**  **Or Cash from------------------------------------------------------------------------** | | **SIGNATURE OF CLAIMANT**  **(with revenue stamp)** |