

BUREAU OF INDIAN STANDARDS
TRANSFER TRAVELLING ALLOWANCE BILL

NAME & DESIGNATION.....
 BASIC PAY RS.....P.M.
 (AT THE TIME OF TRANSFER.....
 FAMILY MEMBERS TRAVELLED.....
 (Also specify name, relationship and age)
 FREIGHT ON LUGGAGE TRANSPORTED..... ADVANCE DRAWN RS.....

Date of Journey	Place & Time		* Mode of travel	No of tickets	*Fare paid Rs
	From	To			

*Also specify distance in case of
 Journeys by road
 * Receipt/Ticket Nos. in support of amount claimed to be given.

Signature_____

Deptt/Section_____

FOR USE IN ACCOUNTS SECTION ONLY

AMOUNT

Admissible (Rs.)

i) Fares

ii) Transfer Grant

iii) Packing Allowance

iv) Cash Allowance

v) Freight on Luggage

vi) Cartage

a) At old Hqrs.

b) At new Hqrs.

Vii) Road Mileage/Conveyance Expenses

Total

Amount due Rs.

Less advance vide voucher

No. _____ (201-----201-----) Rs.....

Net payable Rs.....

Passed for Rs..... (Rupees.....)

Date: _____

Controlling Officer

(P.T.O)

CERTIFICATE

Certified that:

1. I and members of my family have actually performed the journeys in the class of accommodation detailed overleaf and that the family members for whom reimbursement has been claimed are residing with and wholly dependent upon me. Children/parents/sisters/minor brothers in respect of whom transfer TA has been claimed in this bill do not have income from any sources including Pension exceeding Rs. 500.00 P.M.
2. I and my family members were NOT provided free transit by air/rail/road
3. The distance by road by the shortest practicable route from residence (old head quarters) to railways station is _____ km and from railway station (new head quarters) to residence is _____ km and the journeys were performed by taxi/scooter. Free transport/staff car was not used and that the said journeys were not performed by taking a single seat in any public conveyance or local train.
4. The weight of personal effects transported by me from _____ to _____ is _____ kg and that the actual expenses incurred on transportation are not less than the sum claimed.

Signature