



RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA

MEMO OF TRAVELLING ALLOWANCE

(For use by Non-Official Members of University bodies)

(To be filled in CAPITAL LETTERS only, all the columns are mandatory, bills are subject to rejection if all the columns are not filled & are submitted within 06 months of the event)

1. NameDesignation.....
2. College Address.....
.....Mobile No.....
3. Basic Pay.....
4. For the month of
5. Purpose of journey

Date	Place of Journey				Amount Claimed				
	From	Hours	To	Hours	Train/Bus/ Air Fare	D.A	Mileage	Conveyance Allowance	Total

Grand total (in figures and words)

PAN Number.....Account Number.....

Bank NameBranch Name.....

IFSC CODE TIN Number.....

1. Certified that I have travelled by Road ways/Rail/Bus/Air on this journey.
2. Certified that no.T.A and D.A have been claimed from any other sources.

“ACCEPTED”

CONTENTS RECEIVED

Place

Date:

Receipt Stamp & Signature

(For use in Finance Branch)

Office of the Finance Officer, RGUHS, Karnataka, Bangalore
(For Use in Finance Branch)

Head of Service.....

Passed for payment by cheque on the State Bank of India

For Rs.....(Rupees.....

.....

In favour of

Case Worker SO/AS AFO Finance Officer

- 1.Bill No.....
- 2.Voucher No.....
- 3.Chq.No.
- 4.Date:
- 5.Amount

*The Certificate should be ticked and attested with full signature. If journey was performed by other mode of travelling the same may be recorded and Air ticket, Boarding pass & supporting documents must be enclosed in original only.