T.R. FORM NO.21

[See sub-rule (2) of T.R. 4.104]

Note – This bill should be prepared in duplicate - one for payment and the other as officecopy

Travelling Allowance Bill For	Transfer/Leave	Travel	Concession/Tour
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Name of the Office D.D.O. Code	Bill No	Date//
Token No Date/_	/ T.V. No	Date/_/
Head of Account Code		
DT - (T - C - C - C - C - C - C - C - C - C -		
RT A (To be filled up by Gov Employee Identification Numb		
ame:		
esignation:		
Basic Pay on the date of Travel	:	
Purpose: (Strike out whichever	is not applicable)	9
A) For Transfer	B) For LTC	For Tour
Headquarters	Headquarter:	Headquarter:
(a)Old:		
(b)New:		
Residential address	a)Nature and period of leave	Residential Address:
(a)Old:	sanctioned:	3
(b)New:	b)For the Year/Block of Year (Applicable to Central Govt. employees on deputation and/or All India Service	Details and purpose of journey(s) performed:

7. Details of journey(s) performed by the Govt employee as well as members of his/herfamily (Sanction No. and date to be given in Col-6 in case journey(s) has been performed in higher class of accommodation than the one to which the Govt. Employee is entitled and approved by competent Authority.)

Depa Date & Time	From	Arr Date & Time	ival From	Distance in kms. by road	Mode of travel and class of accommodation used	No. of fare with Ticket No.	Fare paid (Rs.)	Class to which entitled	Fare of the entitled class (Rs.)	Duration of halt (for tour only)
1	2	3	4	5	6	7	8	9	10	11
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				100						

8. Particulars of journey(s) performed by road between places connected by rail:

Da	te	Name of	the Place	Class to which	Mode of	Rail Fare
From	To	From	To	entitled	Conveyance used	(Rs.)
1	2	3	4	5	6	7
					3	

(For Transfer and LTC only)

SI No.	Name	Age	Relationship with the Government employee
1.			
2.			
3.			
4.			

10. For Transfer only	
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a)	Transportation	charges of	personal effe	ects (Money	receipts to	be attached)):
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Date	Mode	Station From To	Weight in Kgs.	Rate	Amount	Remarks
			-			
					*	

b)	Transportat	ion c	harges c	f persona	I conveyance
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(Money receipts to be attached)

- (i) Mode of transport and station to which transported:
- (ii) Amount: Rs.

11. For Tour only

Yes/No	
Yes/No	
	Yes/No Yes/No

(ii) Rail

Whether travelled by mail/express/ordinary train

(iii) Road

Mode of conveyance used. i.e., by Government transport/by taking a taxi, a single seat in a bus or other public conveyance/by sharing with another Government employee in a car belonging to him or to a third person to be specified,

B. Dates of absence from place of halt on account of -

ART B (To be filled in the Bill Section)
Strike out whichever is not applicable)

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The net entitlement on account of travelling allo	owance works out to Rs	as detailed below:
James of the state		Rs.
Other Particulars (for Transfer only)		
(i) Road mileage for kms @	per km	Rs.
B. (ii) Transfer grant& Packing Allows		Rs.
(iii) Transfer incidentals (DA for days (@ Rs Per day	Rs.
(iv) Transportation of personal effective (v) Transportation (cts	Rs.
(v)Transportation of private convey	ance	Rs.
Daily Allowance (for Tour only)		
C. (i) days @ Rs		Rs.
(ii) days @ Rs		Rs.
days @ Rs	s per day	Rs.
D. Actual Expenses, if any <i>(for Tour only)</i>		Rs.
Gross Amount		Rs.
E. Amount of advance(s) if any, drawn vide vo	oucher(s) No. date	Rs.
F. Net Amount		Rs.
Net Amount (in words) Rupees		only
Allotment received	Rs.	Jiny
Progressive Expenditure (including this bill)	Rs.	
Balance available	Rs.	
Please pay RsRupees (in words) per beneficiary list enclosed.		0
ill clerk Accountant		ng & Disbursing Officer
Certified that necessary entries have been	Counters Signature of Con	signed by
Certified that necessary entries have been Signature of the Drawing & Disbursing Officer	Counters Signature of Con	signed by ntrolling Officer Book of Shri/Shrimati
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((a)	RH	and	C.L.,
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- (b) not being actually in camp on Sundays and holidays.
- C. Dates on which free board and/or lodging provided by the State or any organisation financed by State funds:
 - a. Board only.
 - b. Lodging only.
 - c. Boarding and lodging. (both)
- D. Particulars to be furnished alongwith hotel receipts, etc., in cases where higher rate of D.A. is claimed for stay in hotel/other establishments providing board and/or lodging at scheduled tariffs.

of stay	Name of the hotel*	Daily rate of	Total amount paid
То		lodging charged	
2	3	4	5
	of stay To 2	of stay To Name of the hotel*	Name of the hotel*

Certified that-

(i)	Information, as given above, is true to the best of my knowledge and belief.
(ii)	That my husband/wife is not employed in Government service/that my husband/wife is employed in Government service and the concession has not been availed of by him/her
	separately or himself/ herself or for any of the family members for the concerned block of
	years (for LTC only).

	Signature of the Government employee
Date	