

# SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

## TA/ Honorarium Bill

1. Name : .....

2. Designation : .....

3. Address : .....

: .....

: .....

4. Purpose : .....

5 PAN No : .....

6. Bank Details : Bank Name: .....

Account No.: ..... IFSC Code: .....

7. Traveling Details :- Vehicle Number:.....

### T.A. (A)

SN. No.	From Station	Date	To Station	Date	Mode of Journey	Rate @6 Rs/Km	Amount
1							
2							

### Honorarium (B)

Number of Days	Rate	Total Amount

Grand Total (A+B) Rs..... (In Words) .....

.....

Signature of Claimant.....

Verified by

HOD.....

Passed for Rs..... (In Words) .....

Finance Officer

Deputy Registrar

Supdt.

Dealing Hand

Submitted for approval Pl.

Registrar

# SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

## TOUR PROGRAMME

1. Name : -----
2. Designation : -----
3. Basic Pay with GP : -----
4. Head Quarter : -----
5. Branch : -----

Date & Time	From Station	Date & Time	To Station	Mode of Journey	Purpose

Recommendation

Signature of official

Signature \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Approved/Not Approved  
Registrar

# SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

## TOUR PROGRAMME

1. Name : -----
2. Designation : -----
3. Basic Pay with GP : -----
4. Head Quarter : -----
5. Branch : -----

Date & Time	From Station	Date & Time	To Station	Mode of Journey	Purpose

Signature of official

Approved/Not Approved  
Vice-Chancellor