

**SPONSORED RESEARCH & CONSULTANCY CELL
NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR
FORM FOR DRAWAL OF TRAVELLING, DAILY ALLOWANCE & REMUNERATION**

1) Name in full:

4) Department:

2) Budget Head:

5) Project Sanction Order No:

3) Purpose of Journey

6) SRCC Registration No:

PARTICULARS OF JOURNEY AND HALTS				Mode of Journey Remarks									
Departure		Arrival		Road			Rail			Air			
Station	Date & Time	Station	Date & Time	Class	Distance (KM)	Fare (Rs.)	Class	Distance (KM)	Fare (Rs.)	Class	Distance (KM)	Fare (Rs.)	
Total							Total				Total		

CERTIFICATION: -

1. Certified that I was / I was not treated as Guest during my halt at..... and was / was not provided with board and lodging / lodging only at State expense / at the expense of the Government of India or another organization (Scheduled tariffs / Hotel bills attached)
2. Certified that this claim is not referred to and paid from any other source.

**Signature of the PI /
Co-PI / Other(s) with Seal**

Signature of the member who travel

P.T.O.

[to be printed overleaf]

Mode of Payment: **Cheque** (Advance if any) or **RTGS/NEFT** (Tick any one)

Name of Beneficiary:		Bank & Branch Name:	
Beneficiary's A/c No:		IFSC Code:	

PARTICULARS	AMOUNT (Rs.)	For Office Use Only	
		Admitted Amount(Rs.)	Pay Rs.....(Rupess..... only)
Road ways fare @ Rs...../ KM (Institute TA Rule)			
Rail ways fare			
Air ways fare			
Hotel Accommodation			Suptd.(SRCC) Jt. Reg. (SRCC)
Food Bill			
Remuneration to Expert			Dealing Asstt. (I. A.) Asstt. Reg. (I. A.)
Actual Expenses			
Less (Advance if any)			
Other Deduction (if any)			
NET CLAIM			<u>Dean(R&C) / Registrar</u>

(Rupess.....
.....only)

**Signature of the PI /
Co-PI / Other(s) with Seal**

Signature of HOD with Seal

Received the payment in full (if yes cheque)

Signature of the Claimant Ch. No.....
Date:.....