

ALL INDIA INSTITUTE OF MEDICAL SCIENCES
RISHIKESH

APPLICATION FOR GRANT OF TA/DA ADVANCE

1.	Name of the Government Servant	:	
2.	Designation	:	
3.	Emp. Code No.	:	
4.	Telephone / Intercom No.	:	
5.	E-Mail Address	:	
6.	Pay	:	
7.	Purpose of Journey	:	
8.	Date & Mode of Onward Journey	:	
9.	Amount of Fares (Rs.)	:	
10.	Date & Mode of Return Journey	:	
11.	Amount of Fares (Rs.)	:	
12.	Details of Local Journey	:	
13.	Accommodation (No. of Days)	:	
14.	Daily Allowance (No. of Days)	:	
15.	Total Amount of Advance Required	:	Rs.
16.	Copy of Approved Tour Programme	:	YES / NO

Dated:

(Signature of the applicant)

CHECK LIST (Cash and Accounts Section)

1. Amount entitled for : Fare Rs.

1	Name of the Government Servant	
2	Designation	
3	Emp. Code No.	
4	Telephone / Intcom No.	
5	Home Address	
6	Rs.	Total Kms = @ Rs...../KM. = Rs.....
7	Purpose of Journey	
8	Date & Mode of Outward Journey	
9		Advance of Rs. (in words) may be sanctioned.
10	Date & Mode of Return Journey	
11	Amount of Fare (Rs.)	
12		Dealing Hand
13		Signature of D. D. O.
14		Controlling Officer
15	Total Amount of Advance Required	Rs.
16	Copy of Approved Tour Programme	YES / NO

Date:

(Signature of the applicant)