

Telangana State Board of Intermediate Education, Hyderabad.
T. A. BILL

Name

Head Quarters

Designation

College Address

Pay drawn Rs. U.G.C. Scale / Revised scale of Pay

Date of Commencement of Valuation/Scrutiny/Coding/Practical Exam/Chief Supdt./Dept. Officer/Squad/RVRC.....

Date of Joining :

Date of Relief :

No. of days worked :

Journey Particulars	From Date & Hour of Departure	To Date & Hour of Arrival	Mode of Journey	Bus Fare Rs.	Train Fare I Class II Class	D. A. Rs.	Total Rs.	Remarks
Onwards Journey								
1. Station								
2. Train No.								
3. No. of Kms.								
Return Journey								
1. Station								
2. Train No.								
3. No. of Kms.								
4. Out Station Allowance :								
(No. of days of Halt Days)								
TOTAL								

(In words Rs.)

CERTIFICATE

Signature of the Claimant

1. I do hereby certify that I have correctly noted the distances shown in the T.A. Bill and have shown them according to the best of knowledge and belief.
2. I certify that no D.A. has been drawn for days of casual leave or Sunday or Holiday not actually spent in camp.
3. I certify that concessional fares were not obtainable for any of the railway journeys covered by the bill.
4. I certify that rail journeys included in this bill, travelled by the class for which T.A. is claimed.
5. I agree to refund to the Board of Intermediate Education, T.S., Hyderabad any amount that may be objected in the audit out of the total amount paid to me in this claim.
6. I certify that I have not drawn nor do I intended to draw T.A. & D.A. for this journey from any other source.

Counter Signed

(Designation)

Passed for Rs. (Rupees

Signature of the Claimant