

VISVA-BHARATI
Santiniketan



BILL NO. _____

DATE _____

LEAVE TRAVEL CONCESSION BILL

FOR THE BLOCK / CALENDAR YEAR _____ TO _____

PLACE OF VISIT :

NEAREST RAILWAY STATION / BUS STAND :

PART -A

(TO BE FILLED BY THE UNIVERSITY EMPLOYEE)

1. Name (In Block Letters) _____
2. Employee Code _____ 3. Designation _____
4. Basic Pay _____ GP _____ 5. Headquarters _____
(As on date of onward journey)
6. Leave Details : a) Nature of Leave _____ b) Period _____
7. Particulars of members of family in respect of whom the LTC has been claimed

Sl. No.	Name	Age	Relationship

8. Details of journey(s) performed by University Employee and the members of his / her family.

Dep. Date & Place	Arrival Date & Place	Distance (Kms)	Mode of Travel used	Class of Accommodation	No. of fares	Fare Paid	Ticket Nos	Reamrks

9. Amount of advance, IF ANY DRAWN ₹

10. Particulars of journey(s) for which higher class of accommodation than the one to which the University Employee is entitled was used. (Sanction No. and date to be given)

Date & Place		Mode of Conveyance	Class to which Entitled	Class by which Traveled	No of fares	Fare Paid	Tickets (Nos)
From	To						

11. Particulars of Journey(s) performed by the road between places connected by rail :

Date & Names of Places		Class to which entitled	Fare Paid	Tickets (Nos)
From	To			

CERTIFIED THAT -

1. The information as given above is true to the best of my knowledge and belief.
2. 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 for himself / herself or for any of the family members for the concerned block of year to
3. That my husband / wife for whom LTC is claimed by me is employed in
.....(name of the Public Sector Undertaking / Corporation / Autonomous Body, etc.), which provides Leave Travel Concession facilities but he / she has not preferred and will not prefer, any claim in this behalf to his / her employer; and
4. That my wife / husband for whom LTC is claimed by me is not employed in any Public Sector Undertaking / Corporation / Autonomous Body financed wholly or partly by the Central Government or Local Body, which provides LTC facilities to its employees and their families.
5. That my father / mother / sister / brother is / are fully dependent on me and their income is less than ₹ 3500/- per month and he / she / they is / are residing with me.
6. I have rendered continuous service for one year or more on the date of commencing the outward journey w. e. f.without any break of service.

Signature of the Head of the
Department with seal and date

Signature of University Employee
Name _____
Code / ID No. _____
Telephone No. _____
Mobile No. _____
Email _____

CERTIFICATE TO BE GIVEN BY ADMINISTRATION

1. Certified that necessary entries have been made in the service book of Shri / Smt/ Kum
2. Joint declaration / certificate received from his / her husband's / wife's office. He / She will avail LTC and other benefits from this office.

Signature of the Officer Authorised to attest in the service book



CERTIFICATES TO BE GIVEN BY THE EMPLOYEE

1. I have not submitted any other claim so far under Leave Travel Concession in respect of myself
or my family members in respect of the block of two years / four years 20.....and 20.....
2. I have already drawn TA for the Leave Travel Concession in respect of a journey performed by me / my wife with.....children. This claim is in respect of the journey performed by my wife / myself withchildren non of whom travelled with the party on the earlier occasion.
3. The journey has been performed by me / my wife / children to the declared 'home town' / 'in lieu of home town' / 'other than home town' viz.....
4. That my husband / wife is not employed in the service of Government / PSU / Autonomous Body.

That my husband / wife is employed in the service of Government / PSU / Autonomous Body and the concession has not been availed of my him / her separately for himself / herself or any of the family members for the concerned block of two / four years.

Signature of Head of the
Department with seal and
Date.....

Full Signature of employee and Date.

ID No.

Department

Phone No.

PART -B

(To be filled by Bill section)

1. The net entitlement an account of Leave Travel Concession works out ₹ _____
Rupees (in words) _____
 - a) Railway / Air / Bus / Steamer Fare ₹ _____
 - b) Less Amount of advance drawn ₹ _____Vide Bill No _____
Dated _____ ₹ _____
Net Amount _____ ₹ _____
2. Expenditure is debitable to _____
Major head _____
Sub head _____

Drawing and Disbursing Officer
(Signature)

Bill Clerk

Initial

Counter Signed

Signature of the Controlling Officer