Gujarat Technological University, Ahmedabad

Date:_____

BILL FOR TRAVELLINGALLOWANCE & HONORARIUM

(For University Practical Exam Centre Only)

Name & Address: Basic Pay:

Phone No. : Email ID:

Date of Journey	**From**	**To**	**Distance/ Kilometer**	**Mode of Journey**	**Class**	**Fare Paid**	**Remark**
							Please Attach Ticket
				Total(A)	**Rs.**		
(B) Honorarium / DA				**No.of Days**	**Rate/Day**	**Total Rs.**	
				Grand Total (A+B)			

(Rupees_____)

Signature:
Name:

Passed for payment Rs._____as TA & Rs._____as Honorium / DA.

Total Rs._____

Principal
Exam Centre

RECEIPT

Received Rs._____(Rupees_____) from ExamCentre Head on behalf of Registrar, Gujarat Technological University, Ahmedabad towards TA and Honorarium.

(Name & Signature)