



Bill No. \_\_\_\_\_ Date \_\_\_\_\_

LEAVE TRAVEL CONCESSION BILL

FOR THE BLOCK /CALENDER YEAR \_\_\_\_\_ To \_\_\_\_\_

PLACE OF VISIT : \_\_\_\_\_

NEAREST RAIL WAY STATION / BUS STAND : \_\_\_\_\_

PART-A

(To be filled up by Govt.  
servant)

1. Emp. Code \_\_\_\_\_ 2. Name : \_\_\_\_\_  
3. Designation : \_\_\_\_\_ 4. Basic Pay: \_\_\_\_\_

(As on date of Journey)

5. Headquarters : \_\_\_\_\_

6. Leave Details

a) Nature of Leave : \_\_\_\_\_ b) Period : \_\_\_\_\_ to \_\_\_\_\_

7. Particulars of members of family in respect of whom the L.T.C. has been claimed

S.NO.	NAME (s)	AGE	Relationship with the Government servant
1			
2			
3			
4			
5			
6			

8. Details of Journey(s) performed by Government Servant 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	PNR Nos	Remarks
Total									

9. Amount of advance, If any Drawn Rs. : NIL

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

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

Certified that :-

1. The information are 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 had not been availed of by him/her separately for himself/herself or for any of the family members for the concerned block year \_\_\_\_\_ to \_\_\_\_\_ .
3. That my husband/wife from 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 Rs. 500/- per month and he/she/they is/are residing with me.

Dated :- \_\_\_/\_\_\_/2015

Signature of Government Servant

Name : \_\_\_\_\_

Emp. Code: \_\_\_\_\_

Telephone No. : \_\_\_\_\_

Email : \_\_\_\_\_

CERTIFICATE OF 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 office. He/She will avail LTC and other benefits from this office.

Signature of the Officer Authorised to attest in the service book

PART-B

(To be filled by Bill section)

1. The net entitlement an account of Leave Travel Concession works out

Rs. \_\_\_\_\_ (Rupees (in words) \_\_\_\_\_)

a) Railway/Air/Bus/Steamer Fare Rs. \_\_\_\_\_

b) Less amount of advance drawn Rs. \_\_\_\_\_

Vide Bill No \_\_\_\_\_

Dated \_\_\_\_/\_\_\_\_/\_\_\_\_ Rs. \_\_\_\_\_

Net Amount \_\_\_\_\_ Rs. \_\_\_\_\_

2. Expenditure is debit able to \_\_\_\_\_

Major Head \_\_\_\_\_

Sub Head \_\_\_\_\_

Drawing and Disbursing officer  
(Signature)

Bill Clerk

Initial

Annexure-‘B’

EXPENDITURE INCURRED ON ACCOUNT OF FOOD BILLS DURING TOUR

This is to certify that Shri/Smt/Miss \_\_\_\_\_ (name of the Official) was on official tour at \_\_\_\_\_ (Place of touring station) from \_\_\_\_\_ (commencement date of journey) to \_\_\_\_\_ (concluding date of journey) (total \_\_\_ days) and incurred expenditure on account of my food amounting to ₹ 450/- @ of ₹ 450/- per day).

It is also certified that I have not been issued any receipt on account of payments made towards my food bills as the Hotel/Restaurant/Stall where I had taken meal/Snacks/beverage had no receipt book with them.

Date : \_\_\_\_/\_\_\_\_/2015

Signature : \_\_\_\_\_  
Name : \_\_\_\_\_  
Designation : \_\_\_\_\_  
U.I.D. : \_\_\_\_\_