



# KAKATIYA UNIVERSITY WARANGAL

TA & DA BILL

**ORIGINAL**

**FORM - 3**

BILL No. /E3/KUW/20

Date : \_\_\_\_\_

Full Name and address \_\_\_\_\_

Examiner or the Member : \_\_\_\_\_

Scale of Pay : 1. State \_\_\_\_\_ 2. UGC \_\_\_\_\_ 3. AGP \_\_\_\_\_

Subject \_\_\_\_\_ Paper \_\_\_\_\_

Purpose of Journey \_\_\_\_\_

Date (s) Oral or Practical \_\_\_\_\_

A/c No. SBH \_\_\_\_\_ IFSC Code No \_\_\_\_\_ Mobile No. \_\_\_\_\_

(1)

From	To	Date & Time		Distance in K.Ms.	Fare payable as per Rules		Total Amount	
		Departure	Arrival		Rs.	Ps.	Rs.	Ps.

(2)

### DAILY ALLOWANCE

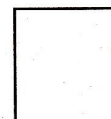
No. of Days	Daily Rate		Total Amount	
	Rs.	Ps.	Rs.	Ps.

Total amount to be paid : Rs. \_\_\_\_\_ Ps. \_\_\_\_\_

Total No. (1)		
Total No. (2)		
<b>GRAND TOTAL</b>		

I certify the correctness of the distance shown in this Bill. The expenditure on conveyance herein included was actually incurred.

Received Rs. \_\_\_\_\_



Date :

Signature of Examiner / Member

Certified that Sri / Dr. / Prof. \_\_\_\_\_  
 was present on \_\_\_\_\_ and that this is his first TA Bill.  
 He is permitted to travel by Air / Train / Bus.

Date : \_\_\_\_\_ **Head of the Dpartment / Principal concerned**

			Amount	
			Rs.	Ps.
Appropriation for current year	...	...		
Expenditure including this bill	...	...		
Balance available				

Sanctioned Rs.

**Accountant** \_\_\_\_\_ **Supdt.** \_\_\_\_\_ **Asst. Register (Exams)** \_\_\_\_\_

Name of Payee	
Particulars	
Countersigned	
Examination Expenses	
Pay the sum of Rs.	
Auditor	Audit Officer

Issued cheque No. \_\_\_\_\_ Date \_\_\_\_\_