

VOUCHER FOR REIMBURSEMENT OF CONVEYANCE CHARGES

- 1 Name of the claimant (in block letters) :
- 2 Designation & Employee Code No. :
- 3 Officer/ Section to which attached :
- 4 Department : Expenditure
5. Amount of conveyance/hire claimed prior up this claim during the calendar month to which the claim pertains :
6. Particulars of journey for which the claim pertains :

Date	To -	From	Mode of conveyance	Amount(Rs.)	Purpose of journey.

Total-

In case of Taxi/Scooter hire the Registration Number of the vehicle should be quoted.

Signature of claimant

P.T.O

- (a) In case other than transportation of bulky stores etc. whether you are satisfied that the matter was so urgent as to send a special messenger other than the normal messenger.
: Yes/No
- (b) In cases when (a) above is satisfied whether it was essential to hire taxi/scooter and whether the purpose could not be served by bus schedule.
: Yes/No
- (c) Whether you are satisfied that the amount of the claim has actually been spent and is reasonable according to prescribed schedule. :
Yes/No
- (d) Whether the staff car/office scooter was available. :
Yes/No
- (e) Whether the claimant is in possession of office cycle and is so why the cycle could not used. Yes/ No
- (f) Whether the claimant has been commented in any other way for this purpose of work.
Yes/No

Section Officer

Under Secretary

Approved _____
Pay Rs. _____ /-(Rs. In words) (Rupees _____ only)

D.D.O.

Received the payment.

Signature of the Claimant _____