

National Institute of Technical Teacher's Training & Research
Shamla Hills Bhopal, 462002 (M.P.)
Travelling Allowance Bill for Candidates
(Adv. 02/2023-24)

1. **Name of the Candidate** (in Capital Letters) :
2. **Name of the Post Applied for:**
3. **Application Number:**
4. **Roll No. :**
5. **Category** : SC/ ST/ PwBD
(Please Tick Appropriately)
6. **Residential Address:**
7. **Mobile Number:** **Alternate Mobile Number:**
8. **E- mail Address:**

Date of Travel	Station From	Station To	Mode of Travel (Rail/ Bus)	Amount Paid for Travel by Rail/ Bus (Attached Proof of Original Ticket)
Total Amount (Rs.)				

Name and Address of Bank.....

Signature of Candidate

Bank A/C No.....

Name of the Candidate.....

IFSC Code.....

For Office Use Only

Passed for Payment for RS.

(Rupees only)

TA Bill Clerk

Supdt.

Account Officer

Director

Receipt

Received an Amount of

Signature.....

Name.....