

T.R. FORM NO. 22)
[See sub-rule (2) of T.R. 4.104]

D.D.O. Code. _____ Bill No. _____ Date _____
Grant No. _____ Token/T.V. No. _____ Date _____
Head of Account Code _____

LEAVE TRAVEL CONCESSION BILL FOR THE YEAR _____/FOR THE BLOCK OF YEAR[†] _____ TO _____

Note – This bill should be prepared in duplicate – one for payment and the other as office copy.

PART A (To be filled up by Government employee)

1. Name
2. Designation
3. Pay
4. Headquarters
5. Nature and period of leave sanctioned
From _____ to _____
6. Particulars of members of family in respect of whom the L.T.C. has been claimed.

Serial No.	Name(s)	Age	Relationship with the Government employee
1.			
2.			
3.			
4.			
5.			

7. Details of journey(s) performed by Government employee and the members of his/her family.

Departure		Arrival		Distance in kms. by road	Mode of travel and class of accommodation used	No. of fares and Ticket No.	Fare paid	Remarks
Date and time	From	Date and time	To					
1	2	3	4	5	6	7	8	9
							Rs.	

[†] Application to Central Govt. employees on deputation and / or All India Service Officers.

8. Amount of advance, if any, drawn Rs. _____
9. Particulars of journey(s) for which higher class of accommodation than the one to which the Government employee is entitled, was used.
(Sanction No. and Date to be given).

Place		Mode of conveyance	Class to which entitled	Class by which actually traveled	No. of fares and Ticket No.	Fare paid	
From	To					Rs.	P.

10. Particulars of journey(s) performed by road between places connected by rail:

Name of Place		Class to which entitled	Rail Fare	
From	To		Rs.	P.

Certified that the –

1. Information, as given above is true to the best of my knowledge and belief; and
2. That my husband/wife is not employed in Government service/that my husband/wife is employed in Government service and the concession has not been availed of by him/her separately or himself/herself or for any of the family members for the concerned block of _____ years.

Signature of the Government employee
Date _____

For use at the Treasury

Examined and entered.

Pay Rs. _____ (Rupees _____) only
(in words)
as per endorsement of the Drawing & Disbursing Officer

Accountant/J.A.O.

T.O./A.T.O./P.A.O./A.P.A.O.

Dated _____ 20__

For use at the Office of the Accountant General (Audit), West Bengal

Admitted Rs. _____

Objected Rs. _____ for reasons stated below.

Dated _____ 20__

Auditor

S.O./A.A.O./Audit Officer
