

**ADITI MAHAVIDYALAYA
(UNIVERSITY OF DELHI)
AUCHANDI ROAD, BAWANA
DELHI -110039**

Dated:

T.A. Form

Name : _____

Designation : _____

Address: _____

Purpose of visit : _____

Mode of Transport : _____

Received an amount of Rs. 1,000/- (Rupees One Thousand Only) on account of Travelling Allowance.

Signature

For Office Use

Passed for Rupees (Rupees)

Section Officer / Senior P.A.

Principal

Receive Rs (Rupees.....)
On account of Travelling Allowance from the Principal , AditiMahavidalaya ,Auchandi Road, Bawana,
Delhi-110039

Dated : _____

Signature

Bank Name :

Bank Account No.

IFSC Code :