

KIRORI MAL COLLEGE, DELHI-110007

(University of Delhi)

CLAIM FOR LEAVE TRAVEL CONCESSION

- | | | | |
|----|---|------------------|-------------------------|
| 1. | Name of the Employee
(In Block Letters) | Block Year | Entitlement |
| 2. | Designation
..... | Class Rly. | Home Town / Place |
| 3. | Department Scale of Pay | of visit | |
| 4. | Nature of Leave sanctioned | Distance | Kms. |
| 5. | Particulars of members of family in respect of whom the L.T.C. has been claimed : | | |

S.No.	Name (s)	Age	Relationship with Govt. Servant
1.			
2.			
3.			
4.			
5.			
6.			
7.			

6. Details of journey performed by Govt. servant & his family members :

[illegible]

(Signature of the Employee)
 Dated

(To be filled in by the Accounts Department)

7. Passed for Rs.(Rupees)
Debit Head : LTC/HTC A/c. in favour of

ACCOUNT ASSTT.	S.O. (A/CS)	A.O.	BURSAR	PRINCIPAL
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8. Paid Rs. Vide Cheque No. Dated

SECTION OFFICER (A/CS)	A.O.	BURSAR	PRINCIPAL
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9. Received a cheque for Rs. (Rupees)

(Signature of the Employee with Revenue Stamp)