འབྲུག་ཚོང་དང་བཟོ་གྲྭའི་ཚོགས་སྡེ།།

Bhutan Chamber of Commerce & Industry

Travel Authorization

NAME: GRADE: Form No. 12.12

DESIGNATION:

No. & DATE

From		Mode of Travel	To		Halt	Purpose
Station	**Date**		**Station**	**Date**		

Estimated Traveling expenses :

Advance Required:

Employee:

Date:

As per our records a sum of Nu. _____ is outstanding against the official as on _____

Accounts Division

Sanctioning Authority (Name & Designation)