



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)