

INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH
LEAVE TRAVEL CONCESSION BILL
 (Any where in India/Home Town)

BLOCK YEAR _____

1. Name of the employee _____
 (In Block Letters)

2. Designation _____

4 Years/2 Years

3. Pay Scale+Gr.Pay _____

4. Entitlement of Class (Air/Rail) _____

5. Place to Visit _____

6. Nearest Railway Station/Air Port _____

7. Nature & Period of Leave Sanctioned _____

8. Details of Family dependent members who traveled:

S.No	Name	Age & Date of Birth	Relationship with the employee
1			
2			
3			
4			
5			
6			

DETAILS OF JOURNEY PERFORMED

Date	Forward Journey Station - From	Return Journey Station - To	Mode of Travel	Distance (Km) By the shortest route	Class of accommodation Actually travelled	Ticket & Receipt No(s) with date	No. of fares	Total Amount	Remarks

P.T.O.

Total Claim (due) Rs. _____
Less: Advance Drawn (-) Rs. _____
Net Amount Payable: _____

certified that :
1. I have not submitted any other claim so far, for leave travel concession in respect of myself or my family members in respect of the block of four years 20____/two years 20____ children. This claim is in respect of the journey performed by me/by my wife with _____ children none of whom traveled with the party on the earlier occasion.

2. I have not already drawn advance for the LTC in respect of _____ children for LTC any where in India/declared home town i.e. _____ and LTC concession has not been availed for performed by my wife/husband with _____ in the ICSSR.

3. The journey has been performed by me/wife with children in Deptt./Office _____ and LTC concession has not been availed for

4. a). That my husband/wife is not employed in ICSSR OR working in _____
b). That my husband/wife is employed in ICSSR OR working in _____

himself/herself/children separately or for any of the family members for the above block years.

Signature of the employee: _____

certified that:
1. Shri/Smt./Dr./Miss _____ has rendered continuous service for one year or more on the date commencing outward journey.

2. The necessary entries have been made in the service book of Shri/Smt./Dr./Miss _____ as per prevailing LTC Rules.

Signature of the Officer
Authorized to attest entries in the Service Book.

(To be filled in by the Finance Branch)

passed for payment of Rs. _____ (Rupees _____)

Debit Head: _____ Countersigned _____

S.O. _____ F.A.&.C.A.O. _____ Controlling Officer/A.O. _____

Paid vide: _____ Dated: _____

Cheque No. _____

Cashier. _____