



# JAYPEE UNIVERSITY OF INFORMATION TECHNOLOGY, WAKNAGHAT, HP

## CLAIM FOR LEAVE TRAVEL ASSISTANCE (LTA)

Name : \_\_\_\_\_ Designation : \_\_\_\_\_

Department: \_\_\_\_\_ Employee Code \_\_\_\_\_ Grade \_\_\_\_\_

Basic Salary Rs.: \_\_\_\_\_ Bill Submission Date : \_\_\_\_\_

### Details of persons traveled :

Sl. No.	Name of the person	Relationship to the employee
1		
2		
3		
4		
5		
6		

### Details of Journey

Sl. No.	Date of Travel	From	To	Travel by Rail / Air / Bus / Taxi	Class of Travel	Amount Rs.
1						
2						
3						
4						
5						
6						

### DECLARATION

I hereby declare that I have actually spent the claimed amount on travel by self on leave and family for the year ..... / block of two years .....

.....  
Signature of Claimant

.....  
Leave Sanctioning Authority

.....  
Verified by HR Deptt.

.....  
Signature of Registrar

### For Accounts Use:

Checked by.....

Passed For Rs. ....

Asstt Finance

Officer Finance Officer

Date .....

Date .....