**JAYPEE UNIVERSITY OF INFORMATION TECHNOLOGY, WAKNAGHAT, HP**

# **CLAIM FOR LEAVE TRAVEL ASSISTANCE (LTA)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_ **Designation:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Department:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Employee Code:\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:**\_\_\_\_\_\_\_\_\_\_\_\_  **Basic Salary Rs**.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**LTA Bill Submission Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| **DETAILS OF PERSONS TRAVELED** | | | | | | | |
| **Sl. No.** | **Name of the Person** | | | | **Relationship** | | |
| 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 |  |  |  |  | |  |  |

**Total Expenses**

**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………**