|  |
| --- |
| **Travelling Allowances Bill for Tour** |
| **Company Name & Address** |
| Employee Name: |   | Employee ID: |   | Designation: |   | Department: |   |
|   |
|   | **From** | **To** |   |   |   | **Expenses** |
| **S No** | **Place** | **Date** | **Place** | **Date** | **Purpose** | **Kms** | **Mode of Travel** | **Transport** | **Food** | **Accommodation** | **(Others)** | **Total** |
| 1 |   |   |   |   |   |   |   |   |   |   |   |   |
| 2 |   |   |   |   |   |   |   |   |   |   |   |   |
| 3 |   |   |   |   |   |   |   |   |   |   |   |   |
| 4 |   |   |   |   |   |   |   |   |   |   |   |   |
| 5 |   |   |   |   |   |   |   |   |   |   |   |   |
| 6 |   |   |   |   |   |   |   |   |   |   |   |   |
| 7 |   |   |   |   |   |   |   |   |   |   |   |   |
| **Total Charges** |  |
| **Cash Advance** |  |
| **TOTAL REIMBURSEMENT AMOUNT**  |  |
|  |  |  |  |  |  |  |  |  |  |  | (amount in words) |
|  |  |   |  |  |   |  |  |  |   |
|  |  | Employee Signature |  |  | Verified By |  |  |  | Approved By |