

**MOTILAL NEHRU NATIONAL INSTITUTE OF TECHNOLOGY, ALLAHABAD**

**Bill No. & Date .....**

**LEAVE TRAVEL CONNECTION BILL**

For the block of year .....to.....  
(To be filled in by the Institute Employee)

1. Name .....
2. Designation .....
3. Scale of Pay .....
4. Headquarters .....
5. Nature and period of leave sanctioned :  
Name of leave .....From .....To .....
6. Particulars of members of family in respect of whom the Leave Travel Concession has been claimed:

Sl. No.	Name(s)	Date of Birth	Relationship with employee

7. Details of Journey(s) performed by Employee and the members of his/her family :-

Departure	Arrival	Distance in Km.	Mode of travel	Class of Accommodation used	No. of fares	Fares paid Rs. P.	Remarks

8. Amount of advance, if any, drawn .....Rs.....

9. Particulars of journey(s) for which higher class of accommodation than the one to which the employee is entitled, was used (Sanction No. and date to be given):

Place		Mode of Conveyance	Class to which entitled	Class by which actually travelled	No. of fares	Fares paid	
From	To					From	To

10. Particulars of Journey(s) performed by road between places connected by rail:

Name of Places		Class to which entitled	Rail fare	
From	To		From	To

**CERTIFIED THAT-**

1. The information as given above is true to the best of my knowledge and belief;
2. That my husband/wife is not employed in the Institute /that my husband/wife is employed in Institute and the concession has not been availed of by him/her separately for himself/herself or for any of the family members for the concerned block of years..... To.....
3. That my husband/wife for whom L.T.C. is claimed by me is employed in ..... (name of the Public Sector Undertaking/Corporation/Autonomous Body, etc.) which provides Leave Travel Concession facilities but he /she has not preferred and will not prefer any claim in this behalf to his/her employer; and
4. That my wife/husband for whom L.T.C. is claimed by me is not employed in any Public Sector Undertaking/Corporation/Autonomous Body financed wholly or partly by the Central Government or a Local Body, Which provides L.T.C. facilities to its employees and their families.

Date .....

Signature of the Employee