## **Saha Institute of Nuclear Physics TA/DA Form for Visitors**

Name	Sri/Smt/Dr.											
Departure location, time, date			Arriva and da Kolka			!			Departure time and date from Kolkata			
Main mode	train]	)				Cost	;					
Distance travelled by road (attach bills)	From and to						Date	Cost		Cost		
	Fı	rom ai	nd to				Date			Cost		
	From and to						Date	Cost		Cost		
	From and to					Date	Cost		Cost			
Enclosed bills (Please √)	A	Air ticket		Onward		Retrun		Boarding	oarding pass		ward	Return
	T	Train ticket		Onward		Return		Taxi/Bus		Onward		Return
	Accommodation			n		SINP guesth		nouse		Own arrang		ements
Specify any other bills and attach												
Full official address												
Whether un												
Visitor's designation			n	Basic				c pay + G	rade p	ay		
Bank name				Brai				nch name		T		
Account number				IF			IFSC	SC code				
Signature v	vitl	n date										
N.B: All fiels are mandtory to fill for the processing the claim. All necessary bills/documents must be counter signed by the visitor. Department/Section must cross check all documents and will attach the approval copy of the visit.												
For Office use												
Air/Train/Bus:								R	LS			
Road mileage/Taxi:								Ls				
DA, if any:								F	Rs			
Honorarium:								R	Ls			
Received the sum of rupees only												
										;	Signatuı	e with date

Prepared by AO DCA Registrar Director