BTC FORM - 20

[See Rule 165] Travelling Allowance Bill

GAZETTED / NON- GAZETTED	For use at Treasury
Bill No20	Token No
Account Head Information	Treasury Code
Grant/Demand No	DDO Code
Budget Head:	Bank Code
Major Head	Allotment Details
Sub Major Head	Total Allotment
Minor Head	Expenditure before this Bill
Sub Head	Amount of this Bill
Bill Code	Balance of Allotment
Note :- This bill should be prepared in duplicate-	
one for payment and other as office copy.	Amount of T.A. Advance (If any)

PART A

(To be filled up by the government employee)

1. Name	Designation
	3
3. Pay 4. H	Headquarters

5. Details of Expenditure(s) and purpose of journey(s) performed:-

Depa	rture	Arriv	val	vel/ and tion	ıs. ge	Ħ	Ч	S			
Date & Time	From	Date & Time	7	Mode of travel/ Conveyance and Class of accommodation	Distance in kms. for road mileage	Duration of halt	Class to which Entitled	Fare of the Entitled Class	Fare Paid	Purpose of journey and Ticket No	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
							•				

[If the journey(s) by higher class of accommodation has been performed with the approval of the competent authority then number and date of the sanction may be quoted in column 12.]

(iii) By Road (Mode of conveyance used......)

[Mode of conveyance used i.e. by government transport /by taking a taxi, a single seat in a bus or other public conveyance, by sharing with another government employee in a car belonging to him or to a third person to be specified.]

7. Dates of absence from place of halt (on account of)

(i) R.H./C.L.

(ii) Public/Gazetted Holiday

8. Dates on which the boarding and/or lodging was provided by the State or any organisation financed by State Funds:-

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Perio	d of stay		of the Hotel/ other	Daily rate of			amount
From	То	est	tablishments	and/or Lodgin	ig charged	pa	aid
). Details o	l f journey(s) p	erformed l	oy road between p	l places not conne	ected by Ra	ail.	
Date	Mode	e of	Name o	f places		are paid	J
	Conveyar	ce used	From	То			,
4							
			3 given above is performed in the			knowle	b. dge ar
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Bill ClerkAccountantSignature of the D.D.O.Countersigned......Signature of the Controlling Officer

Please pay Net Amount Rs.(in words) Rs.....only.

For use in Treasury

Pay Rs.....

Dated20...... *Treasury Accountant Treasury Officer*

For use in Accountant - General's Office

Admitted Rs.....
Objected to Rs....

Reason of objection.....

Auditor Accounts Officer