

HOCKEY INDIA / HOCKEY INDIA LEAGUE
TA/DA

NAME _____
STATE / UNIT / OTHER _____
DESIGNATION _____
NAME OF MEETING / OTHER _____
DATE OF MEETING _____
PLACE OF MEETING _____

Fare / Mode of Travel _____

From _____ to _____ Rs.
From _____ to _____ Rs.
From _____ to _____ Rs.
From _____ to _____ Rs.

Taxi Charges Total :_ Rs.....

TOTAL Rs.....

PLEASE ATTACH ALL ORIGINAL BILLS / RECEIPTS AND SIGN ON THEM TO VERIFY THEIR AUTHENTICITY

SIGNATURE _____

VERIFIED PAYMENT FOR RS. AND APPROVED

MANAGER-FINANCE E.S. PVT. LTD.	ACCOUNTS E.S. PVT. LTD.	JOINT DIRECTOR HOCKEY INDIA	EXECUTIVE DIRECTOR HOCKEY INDIA
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CEO HI / HIL	TREASURER HI / HIL	CHAIRPERSON FIN & AUDIT COM HI / HIL	SECRETARY GENERAL HOCKEY INDIA
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