

**TRACKON COURIERS PVT. LTD.**  
**TRAVELLING EXPENSE STATEMENT**

BRANCH: \_\_\_\_\_

Date: \_\_\_\_\_

Name : \_\_\_\_\_ Designation: \_\_\_\_\_ Department : \_\_\_\_\_

Date of travel From: \_\_\_\_\_ Time: \_\_\_\_\_ To: \_\_\_\_\_ Time: \_\_\_\_\_  
DD/MM/YY DD/MM/YY

Place(s) visited : \_\_\_\_\_

**A. Travel Expenses**

| Date         | Description | Class | Amount |
|--------------|-------------|-------|--------|
|              |             |       |        |
|              |             |       |        |
|              |             |       |        |
|              |             |       |        |
| <b>TOTAL</b> |             |       |        |

(Attach train / Bus ticket)

**B. Boarding and Lodging Expenses**

| Date         | Description | Amount   |
|--------------|-------------|----------|
|              |             |          |
|              |             |          |
|              |             |          |
|              |             |          |
|              |             |          |
|              |             |          |
| <b>TOTAL</b> |             | <b>0</b> |

(Attach Hotel Bills)

**C. Conveyance expenses**

| Date         | Description | Amount |
|--------------|-------------|--------|
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
| <b>TOTAL</b> |             |        |

**E. Others**

| Date         | Description | Amount |
|--------------|-------------|--------|
|              |             |        |
|              |             |        |
|              |             |        |
|              |             |        |
| <b>TOTAL</b> |             |        |

**F. Total Expenses**

| Expenses Head        | Amount |
|----------------------|--------|
| Travel Expenses      |        |
| Boarding and Lodging |        |
| Conveyance           |        |
| Telephone expenses   |        |
| Other expenses       |        |
| <b>GRAND TOTAL</b>   |        |

(Rupees \_\_\_\_\_ )

Advance Received : Rs.

Total Expenses Incurred : Rs.

Balance to be paid to company / Employee : Rs.

I declare the information provided above is the best of my knowledge and belief. In case of any false claim, I shall abide by whatsoever action taken by the management.

**Sign of employee**

**Recommended by  
(DIRECTOR/ HOD)**

**Approved by**

**Functional Head**

(FOR THE USE OF ACCOUNTS DEPARTMENT)

Checked by

Verified by

**(Accounts Department is authorized to deduct excess claim, if any from the bill)**