INDIAN STATISTICAL INSTITUTE

* TOUR PROGRAMME

(As per Office Order No. C 3824 dt. 28-8-60)

| 1. | Name | 2. Roll No. |
|-----|--|------------------------------------|
| 3. | Designation | |
| 4. | Date of departure | 5. Approximate date of return |
| 6. | Details of journey with intermediate halts | |
| 7. | State ISI Govt./ other work | 8. Mode of Travel |
| | Purpose of travel | |
| | Source of payment of T. A. and D. A. | |
| 11. | Address at place of halt | |
| | | |
| 2 | Signature of Officer to perform the tour | Signature of Sanctioning Authority |
| | Date: | Date: |

* To be submitted in DUPLICATE to the sanctioning authority One copy should be attached to the T.A. Bill for the guidence of the authority sanctioning bill and of the Accounts Section for paying the bill.