

**SINTEX INDUSTRIES LIMITED – YARN DIVISION
Claim Voucher of LEAVE TRAVEL**

Name of Claimant :		
Designation:		
Dt. Of Joining:		Empl. No.
Particulars of Previous claim received under the Scheme		
Period of Journey:	From Dt.	To Dt.
Particulars of current claim:		
Period of Leave sanctioned: From Dt.		To Dt.
Period of Journey:	From Dt.	To Dt.
Particulars of Journey : (A) Persons traveled with the claimant :		
Name of Person	Relation with Claimant	Age (Years)
1		
2		
3		
4		
5		
6		
7		
(B) Actual Expenses Incurred Rs.		
(C) Mode of Transport :		
(D) Cheque payable at : Kalol		Ahmedabad

The above facts are true and correct

Head of Department	Signature of Claimant
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Passing Authorities :		
President (Oper.)	C.F.O.	Managing Director

FOR OFFICE USE ONLY

Permissible Amount Rs.:	Cheque Amt. Rs.
Amount liable to tax Rs.	
Amt. not liable to Tax Rs.	
Advised to T.K. :	
1. Please check leave availed	
2. Please note taxable amount	
3. Please confirm whether eligible for L.T.C. or not?	
4. If claimant has resigned please give the date of resignation	

