



KRISUMI CORPORATION

Annexure to Domestic Travel Expenses Claim Format

TRAVELLING BILL

NAME : Rambir EMP-10-(K1010)

DESIGNATION :

S.NO	DATE	TIME	FROM	TO	ARRIVAL TIME	MODE OF TRANSPORT	FARE (Paid by employee)	FARE (Paid by Company)
1	18-3-2025	TO	20-3-2025	Krisumi	CHD	(AP (Redy))	5400	
2					(DTCP)			
3								
4						Toll Chage = 1050		
5								
6								
7								
Total							704 6450	0

EXPENSES DETAILS

Sl. No.	Expenses	No. Of Days	Bill No.	Date	AMOUNT (USD \$)	AMOUNT (Rs.)	
1	Lodging	18-3-2025				= 5328	
2	Boarding	TO 20-3-2025					
3	Conveyance (Please Give details Below)						
4	Entertainment						
5	Telephone						
6	Printing & Stationery						
7	Airport Taxes						
8	Others (Pls. Specify)						
TOTAL							5328 0

CONVEYANCE EXPENSES DETAILS

DATE	FROM	TO	MODE	KM	RATE	AMOUNT	PURPOSE
18-3-2025	Krisumi	DTCP (to)	by Road	600	9	= 5400	205/16 DTCP
To							
20-3-2025			Toll	Chg		= 1050	(Office work Purpose)
Total						6450	

6450 + 5328 =

11778

सुसंगत और ही नु प्रमाण के अनुसार

Signature of the Employee

Rambir
18/3/2025

21/3/25

जय श्री गणेश

18-3-2025

TO

20-3-2025

CASH / CREDIT MEMO Bought of विक्रेता

नकद / उधार पत्र
Sold to क्रेता [Signature]

No. क्रमांक _____ Date तिथि 20/3/25

Qnty. संख्या	PARTICULARS विवरण	Rate दर	Amount रकम
1	Bisleys		20
3	Rohm		45
1	Gulab		125
			<u>185</u>
Thanking You धन्यवाद		Total जोड़	

Goods once sold will not be taken back E.&O.E भूल चूक लेनी देनी
Signature हस्ताक्षर

Bought of : विक्रेता : _____

Sold to क्रेता : _____

S. No. [Signature] Date 20/3/2025

QTY. संख्या	PARTICULARS विवरण	RATE दर	AMOUNT रकम Rs. P.
	P.T.C.P. <u>[Signature]</u>		
19/3/2025			150
19/3/2025			150
20/3/2025			150
TOTAL कूल जाम			<u>450</u>

Thank You! धन्यवाद! E & O.E भूल-चूक लेनी-देनी
Goods once sold will not be taken back.
Signature हस्ताक्षर Manya

Tan 450 + 185 = 635

Bank Details		Customer Details		
Statement Reference Number	210325/102308/27	Customer ID:	17795090	Address: RAMBIR Badsa 77 - 124105, Haryana, INDIA.
Name of ICICI Bank Branch making the supply:	ICICI Bank Limited BKC	Name:	RAMBIR .	
Bill From Address of ICICI:	ICICI Bank Towers, Bandra Kurla Complex, Mumbai 400071	Statement Period:	17-03-2025 to 21-03-2025	
GSTIN of ICICI:	27AAACI1195H3ZK	Statement Date:	21-03-2025	
Place of Supply:	Haryana	Type of address:	Permanent	
		GSTIN Number:	N/A	
		State Code:	06	

Vehicle Summary							
Tag Account No.	Licence Plate No.	Group	Trip Count	Opening Balance (Rs.)	Credit (Rs.)	Debit (Rs.)	Closing Balance (Rs.)
28877562	HR26DV6413	Default	10	457.88	500.00	- 1050.00	- 92.12
Total			10	457.88	500.00	- 1050.00	- 92.12

Transaction Details					
Date & Time	Activity	Unique Transaction ID	Transaction Description	Amount (Rs.)(CR)	Amount (Rs.)(DR)
HR26DV6413 - 28877562					
20-03-2025 19:09:15	Trip (RRN No / Trip No)	312039003200325190915 / 4316360896	Plaza Name:Badli- Lane ID:LANE03	0.00	160.00
20-03-2025 18:06:35	Trip (RRN No / Trip No)	0010002503201808013292 / 4316130285	Plaza Name:BhaganTollplaza- Lane ID:LN013	0.00	115.00
20-03-2025 17:31:22	Trip (RRN No / Trip No)	004947456569 / 4316009911	Plaza Name:LandTPANIPAT- Lane ID:00003	0.00	40.00
20-03-2025 17:10:17	Trip (RRN No / Trip No)	0010012503201710295920 / 4315952007	Plaza Name:GharondaTollPlaza- Lane ID:010220	0.00	185.00
20-03-2025 15:27:10	Trip (RRN No / Trip No)	004947078019 / 4315695174	Plaza Name:AmbalaChandigarh- Lane ID:LA02	0.00	50.00
20-03-2025 15:25:53	Payment	PKT000000242325135	Payment through Bharat Bill Pay	500.00	0.00
18-03-2025 11:39:27	Trip (RRN No / Trip No)	004939560013 / 4309481198	Plaza Name:AmbalaChandigarh- Lane ID:LC01	0.00	50.00
18-03-2025 09:44:32	Trip (RRN No / Trip No)	0010002503180944444958 / 4309191133	Plaza Name:GharondaTollPlaza- Lane ID:010203	0.00	185.00
18-03-2025 09:30:55	Trip (RRN No / Trip No)	004939195629 / 4309158417	Plaza Name:LandTPANIPAT- Lane ID:00013	0.00	40.00
18-03-2025 08:58:23	Trip (RRN No / Trip No)	0010002503180859060336 / 4309078891	Plaza Name:BhaganTollplaza- Lane ID:LN017	0.00	115.00
18-03-2025 08:35:58	Trip (RRN No / Trip No)	312036008180325083558 / 4309041493	Plaza Name:Kundali- Lane ID:LANE08	0.00	110.00

CUG Payment Details
No transaction details to display

GSTIN Details
No transaction details to display

Load by UPI
No transaction details to display

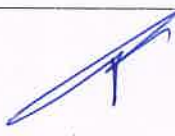
1050
D. R. K.

TAX INVOICE

UT STATE GUEST HOUSE-2

Hospitality Department, Chandigarh Admn
MADHYA MARG, SECTOR 18 CHANDIGARH
PHONE-0172-2700791-792

GSTIN-04AAFAP9541F1ZK

Invoice No.: 04827	Folio : 4464	Reg. No. : 4451	Invoice Date : 20/03/2025				
Room No(s) : 206		Arrival Date : 18/03/2025					
Guest Name : Mr.RAMBIR		Arrival Time : 18:01					
Company : Online Booking		Departure Date : 20/03/2025					
Address : VPO BADRA, JHAJJAR, HARYANA, JHAJJER		Departure Time : 10:53:19					
		No. of Persons : 1+ 0					
Party's GSTIN :	Place of Service : UT-CHANDIGARH						
Date	V.No.	Room	Description	HSN/SAC Code	Debit	Credit	Balance
18/03	0	206	ROOM CHARGES #206		1800.00		1800.00
18/03	0	206	CGST(R)@ 6.00% #206		108.00		1908.00
18/03	0	206	UTGST(R)@ 6.00% #206		108.00		2016.00
18/03	020507	206	RESTAURANT		168.00		2184.00
19/03	0	206	ROOM CHARGES #206		1800.00		3984.00
19/03	0	206	CGST(R)@ 6.00% #206		108.00		4092.00
19/03	0	206	UTGST(R)@ 6.00% #206		108.00		4200.00
19/03	020533	206	RESTAURANT		199.50		4399.50
19/03	020545	206	RESTAURANT		157.50		4557.00
19/03	020558	206	RESTAURANT		52.50		4609.50
20/03	020618	206	RESTAURANT		84.00		4693.50
Rs Four Thousand Six Hundred Ninety Three & paise Fifty only					Net Amount		4693.50
20/03	0	206			0.50		4694.00
20/03	9039	206	Advance Cash			4032.00	662.00
20/03	9040	206	Cash Receipt			662.00	
4693.5							
Terms & Conditions				For UT STATE GUEST HOUSE-2 Hospitality Department, Chandigarh Admn			
1. Drinks are not allowed in the premises.							
2. Charges once paid can not be refundable.							
3. Vistors are responsible for the saftey of their belongings.							
4. This is a computer-generated bill. Does not require a signature.							
				ROHIT			
Bill verified & recommended for payment. I agree to be held personally liable for payment of this bill regardless of charges & Instructions							
Guest Copy				Guest Signature		Pg.1/2	
Thank you for being with us !!!							

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		No. of Persons : 1+ 0	
Party's GSTIN :	Place of Service : UT-CHANDIGARH		

Date	V.No.	Room	Description	HSN/SAC Code	Debit	Credit	Balance	
HSN/SAC Code	Account Description		Tax Rate	Taxable Amount	CGST Amount	UTGST Amount	VAT Amount	Total Amount
	ROOM RENT 12%		12.0	3600.00	216.00	216.00	0.00	4032.00
	FOOD SALE		5.0	630.00	15.75	15.75	0.00	661.50
			Grand Total		4230.00	231.75	0.00	4693.50



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For UT STATE GUEST HOUSE-2
Hospitality Department, Chandigarh Admn

ROHIT

Bill verified & recommended for payment. I agree to be held personally liable for payment of this bill regardless of charges & instructions

Guest Copy

Guest Signature

Pg.2/ 2

Thank you for being with us !!!