

TRIP SHEET

Date :
Vehicle No. :
Starting Place :
Starting KM reading :
Places of visit :
Final destination :
Final KM reading :
KM Covered :
Rate per KM :
Amount for running :
Period of halt :
Waiting charge :
Total amount :

Received a sum (Rupees _____ only) as
cash from District/Chief/Medical Officer , _____ on _____

Signature & name of Driver

CERTIFICATE

Certified that the vehicle is hired by me and used for

.....
.....

(Specify the purpose) and expenditure has been met from the fund released form

Place:

Date:

Name and designation of the Officer