

भारतीय आयुर्विज्ञान अनुसंधान परिषद
INDIAN COUNCIL OF MEDICAL RESEARCH
मांग पर्ची
REQUISITION SLIP

- अधिकारी का नाम आयु
1. Name of Officer Age
- पदनाम
2. Designation Ext. No..... Room No.....
3. E-mail
- दूरभाष मोबाईल
4. Phone Number (Mobile)
- मूल वेतन + एनपीए (यदि ग्राह्य हो)
5. Basic Pay + NPA (If applicable)

दिल्ली से..... दिनांक..... उड़ान सं..... समय.....
Delhi to Date..... Flt.No..... Time.....

..... से दिल्ली को दिनांक..... उड़ान सं..... समय.....
From to Delhi – Date Flt No..... Time.....

दिनांक
Date:

अधिकारी के हस्ताक्षर
Signature of the Officer

सक्षम प्राधिकारी द्वारा मंजूर किए गए दौरे के कार्यक्रम की प्रति संलग्न की जानी है जहा लागू हो।
Copy of sanction of tour programme by the competent Authority to be enclosed, wherever applicable.

Copy to : Travel Desk, R. No.125, Ext. No. 301

Note:- Reference O.M. No.19024/03/202-E.IV dated 16 June 2022, Department of Expenditure, Ministry of Finance, GOI. Employees are to choose flight having the **Best Available Fare** on their entitled travel class, which is the **Cheapest Fare** available, preferable for Non-stop flight in a given slot at the time of booking:

- (a) On the day of travel in the desired 3 hours slot of following time band – 00.00 to 03.00, 03.00 to 06.00, 06.00 to 09.00, 09.00 to 12.00, 12.00 to 15.00, 15.00 to 18.00, 18.00 to 21.00, 21.00 to 24.00
- (b) With provision of optimizing within a 10% price band, for convenience and comfort.