N.W.R

उत्तर पश्चिम रेलवे

CONTINGENT BILL

G46F

1/RB/GB-1

G1364

NAME .... DESIGNATION ....

HEAD QUARTER .... MONTH .... DEPTT ....

DATE	TRAIN/RV	TIME(LEFT)	TIME(ARRIVED)	FROM	TO	WORK DONE	K.M.	AMOUNT

Amount in words:

Total

Certified that the above expenses have actually been paid by me in discharge of railway duty and the amount claimed has been actually spent and that the expenditure was necessary and unavoidable.

Countersigned **Controlling officer** **Signature of head office** **Signature of Employee**