

NO: TLA/8-2/29/818 dt. 5/8/92.

D U T Y S L I P

ZONAL AGRICULTURE OFFICE
DEPARTMENT OF AGRICULTURE
LITTLE ANDAMAN

No. _____ Dated: 6.8.19

Name of Indenter: Social worker, S/Bang

Address: -----

In case of field Operation:-

Amount paid Rs.-----through A.D.-----Exn.Circle.

Impliment required:-----for hours-----

In case of Transportation/Visit:-

Purpose: convenience of medical team

From: Ant Bay to South Bay

Driver's Name: Shagorban

Mate's Name: John Galdy,

Tentative date to carry out work: 7/8/98

Signature of Incharge

Particulars of performance of Vehicle No: 4661

In case of field Operation

In case Transportation/Visit

Date: _____

Date: 7.8.13

Road run: -----

From: And Bay

Field run: _____

To: South Bend

Field to field run-----

Initial reading-----6:45am-----

Final reading: 4 pm

Total KM/Hours run: 10 Hrs

Signature of Circle Incharge

Signature of Driver

Signature of Indentor