



दि न्यू इन्डिया एश्योरन्स कंपनी लिमिटेड

**THE NEW INDIA ASSURANCE COMPANY LTD.**

पंजीकृत एवं प्रधान कार्यालय : न्यू इन्डिया एश्योरन्स बिल्डिंग, 87, महात्मा गांधी मार्ग, फोर्ट, मुंबई - 400 001.

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CIN No. L66000MH1919GOI000526

Phone : 022-22708100

22708400

Website : www.newindia.co.in

**TRAVELLING EXPENSES REIMBURSEMENT FORM**

**Reimbursement for Travelling Expenses for Attending Interview**

**for the Post of Administrative Officer (Scale-I) (Generalists & Specialists), Recruitment Exercise 2025**

The undersigned appeared for Interview for the above mentioned post on (date) .....

at (venue) .....

Date of Journey	Mode of Journey	Travel Particulars			Fare (in Rs.)
		From	To	Ticket/PNR No.	

\*Tickets are enclosed.

Place :

Signature of Candidate

Date :

Name:

Roll No:

**FOR OFFICE USE ONLY**

Recommended for payment of Rs..... (Rupees .....  
.....)

(Signature of Officer)

Sanctioned payment of Rs..... (Rupees .....  
.....)

Place :

Date :

(Signature of Sanctioning Authority)

ECS/NEFT Sent on: .....

Voucher No.: .....