

NATIONAL INSTITUTE FOR BIOTECHNOLOGY AND GENETIC ENGINEERING
P.O. BOX # 577 JHANG ROAD FAISALABAD

DUTY SLIP

FOR OFFICIAL USE

FOR OFFICE USE

1. For whom required _____
2. Purpose of journey in details _____

3. Vehicle required date _____ to _____
4. Time: From _____ Hrs. To _____ Hrs. _____
5. Place to be visited _____
6. Place of reporting _____
7. Vehicle required: Wagon Pick-up Car Motor Cycle
 Suzuki Car Bus

Signature: _____

Name of Indenter _____

Signature; _____

Head of Branch/Division

AVAILABILITY

- Available
 Not Available
 Alternate _____
Available Transport Assistant

APPROVAL

Administrator

ALLOWED/NOT ALLOWED

Director, NIBGE

DUTY

Vehicle No. _____

Meter reading out _____

Driver _____

Meter reading in _____

Overtime Hours of Driver (if any) _____

Mileage covered _____