

**Proposal for the Financial Assistance  
From Cooperative Education Fund of NCUI for the  
Inter State Visit  
of elected office bearers and directors of State/District Cooperative  
Unions/Federations**

1. Name & address of the Coordinating organization :
2. No. of Participants (please attach list of names of the participants & their Organizations) :
3. State(s) to be visited :
4. Duration of the Programme :
5. Budget Estimate :

Sl.No.	Head	B.E. Amt. per person	Total Amount
a.	Train/Bus fare		
b.	Boarding expense		
c.	Lodging charges		
d.	Local Conveyance		
e.	Miscellaneous		
		<b>Grand Total</b>	<b>=</b>

6. Contribution of the Coordinating organization :

Signature of the Chief Executive \_\_\_\_\_

Dated..... Name of the Chief Executive \_\_\_\_\_