



**RETURN FOR LEVY  
TRAVEL AGENT**

SOURCE DESCRIPTION	LEVY FOR THE PERIOD ENDED	TOTAL LEVY COLLECTED	UNPAID BALANCE
Name of Travel Agent	____/____/____	M _____	M _____
	No. of Tickets Sold	Method of Payment	
	_____	Cash ____	Cheque ____ EFT ____

**Signature:** \_\_\_\_\_  
\_\_\_\_\_

**Date:**