## REPUBLIC OF KENYA.

**KANGUNDO NG – CDF COMMITTEE**

## PAYMENT VOUCHER

## (VOTED PROVISION)

Payee’s Name and Address

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Particulars | **LPO/LSO**  **No.** | **Invoice**  **No.** | Amount | |
| **Shs.** | Cts. |
| **Being payments of outstanding bill for the construction works at Kanzokea Primary School Plus agreed legal fees as directed by the Court order** |  |  | **887,282.20** | **00** |

|  |  |  |
| --- | --- | --- |
| Amount payable | **887,282.20** | **00** |

Authority Reference No……………………………………………..

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| EXAMINATIONVoucher Examined by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Internal Audit | | | | | |
|  | | | | | |
| V.B.C CERTIFICATE I certify that the expenditure has been entered in the Vote Book and that adequate funds to cover it are available against the chargeable item as shown here below:  *Approved* Estimates/Allocation--  Item No……………………….... KSh. **\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Less*: **Total expenditure plus commitments** Ksh.  Balance --- Ksh \_\_\_\_\_\_\_\_\_\_\_\_\_  *Less*: **This ENTRY –Vch.**  No………………………………..…. .Ksh  Balance - Ksh.  Date…………………..… Signature…­……………….….  *Accountant i/c VBC* | | | | A.I.E HOLDER CERTIFICATE  I Certify that the expenditure detailed above has been incurred for the authorized purpose and should be charged to the item shown here below.    **………. ……………………**  **F.A.M. - KANGUNDO**  *Signature Designation of A.I.E Holder*  Date….……………….. AUTHORIZATION `  I certify that the rate/price charged is/are according to regulation/contract, fair and reasonable, that the expenditure has been incurred on proper authority and should be charged as under. *Where appropriate a certificate overleaf has been completed*. I hereby AUTHORIZE ***payment of the amount shown above*** without any alteration.  Signature………………………………………  ***Accounting Officer/District Accountant****\**  Date…………………………………….. | | | | | |
| **Vote**  **4** | | Head  **077** | | **Sub-Head** | | | | **Item:**  **2640200-101-Emergency** | |
| **A.I.E No:**  **2017/2018** | **Account Number**  **4-018-077-2640200-101-2017/18-Emergency** | | **Dept. Vch. No.** | | Station | CASH BOOK | | AMOUNT | |
| **Vch. No.** | **Date** | **887,282.20** | **Cts.**  **00** |

## NON-AVAILABILITY

I Certify that Stores/Stationery could not be obtained from the Supplies Branch/Government printer vide their certificate attached.

………………………. ………………..…………

# ***Signature Designation***

**RECEIPT OF GOODS/STORES/CONTAINERS**

I certify that the items have been taken on charge and entered in Stores Ledger/Inventory Folio No……………. ………or recorded and issued for immediate use.

……………………….

# ***Signature Designation***

**PURCHASE OF PETROL, ETC.**

I certify that Petrol/Oil/Tyres/Batteries have been received and entered in the vehicle Log-book of and or in the Bulk petrol Register, Folio No………………

………………………. ………………..…………

# ***Signature Designation***

# **SERVICES**

I certify that the services have been rendered properly and in accordance with regulations/terms of the contract.

………………………. ………………..…………

*Signature Designation*

**OTHER CERTIFICATE*:***

… ………………………………………………………………………………………………………….……………………………….

……………………………………………………………………………………………………………………………………………….…

……………………………………

*Signature*

………………………………………………

# ***Designation***

*Receipt not required when payment is made by cheque with form of receipts on reverse.*

Received in payment of the account stated on the face hereof the sum of

Sh. ………………………………………………………. Cts. …………………

(Sh. …………………………………. Cts. …………….)

Witness …………………………………………………..

…………………………

***Signature or Thumbprint***

Date ………………………………………………………

Date………………

F.O.20

GPK (SP)

# **REPAIRS TO MOTOR VEHICLES**

I certify that the repairs have been completed and/or spares fitted and entered in the vehicle Log-book of ………

………………………. …………….

# ***Signature Designation***

# **TRANSPORT HIRE**

I certify that no Government transport was available and that the charges are reasonable and correct

………………………. ………………..…………

# ***Signature Designation***

# **TELEPHONES ACCOUNTS**

I certify that the cost of any private call has been/will be recovered from the persons concerned and the charge may be accepted against public funds.

………………………. ………………..…………

# ***Signature Designation***

# **HOSPITAL CLAIMS**

I certify that the officer availed himself to my hospitality enjoyed the hospitality of the officer to the extent shown on the claim while visiting on official duty`.

………………………. ………………..…………

# ***Signature Designation***