

*2015 National Government Constituencies Development Fund No. 30***FOURTH SCHEDULE (s. 16)****PROJECT DESCRIPTION FORM**Constituency No: **076** Constituency Name **YATTA** County **MACHAKOS**Project Number **076/2210701**Project Title **Constituency oversight committee**Sector **COC**

Status of projects (tick one) New..... Extension..... On-going...✓.....

Rehabilitation .....

Brief statement on project status at time of submission

**Payment of constituencu oversight committee expenses**Financial year **2022** 1<sup>st</sup> July To 30<sup>th</sup> June **2023**Original Cost estimates, in Kshs. **1,400,000** dated.....Amount allocated last financial year **nil**Amount allocated this financial year **1,400,000**

<b>Project Name</b>	<b>Project Number</b>	<b>Activity</b>	<b>Amount</b>	<b>Status</b>
Constituency oversight committee	4-0016-076-2210701-114-2022-2023-1	<b>Travel Allowance on training</b> - Payment of travel allowances on training for 5 members	300,000	
Constituency oversight committee	4-0016-076-2210710-114-2022-2023-2	<b>Accomodation Allowance</b> - Payment of accommodation allowances for 5 committee members	335,000	
Constituency oversight committee	4-0016-076-2210403-114-2022-2023-1	<b>Daily Subsistence Allowance</b> - Payment of committee allowances for 5 members	300,000	
Constituency oversight committee	4-0016-076-2210303-114-2022-2023-1	<b>Daily Subsistence Payment of Daily Subsistence Allowance</b> - Daily subsistence payment of Daily subsistence Allowances for 5 members	165,000	
Constituency oversight committee	4-0016-076-2210402-114-2022-2023-1	<b>Accommodation</b> - Payment of Accommodation expenses on Domestic travel for 5 members	300,000	

Project Name	Project Number	Activity	Amount	Status
TOTAL			1,400,000	

Person completing form: Name .....**Stephen maina**..... Position **Fund Account**

**Manager**



5/06/2023

Signature..... Date.....