

RETIREMENT OF IMPREST

Name of Officer

Check No.
.....

Ministry /Region

Division /District

Date of Commencement at Safari Termination on

Imprest No of for TShs

Issued at

OFFICER'S CERTIFICATE

I certify that I traveled to Where I stayed

ForNights. I am therefore entitled to subsistence allowance

Tshs plus incidental expenses arrived at as follows:-

Date of Departure	Place	Date of Arrival	Place	Number of Nights	Rate of Allowance	Total Subsistence Allowances
Add Incidentals expenses payable under Paragraph of staff Circular of 1976						
TOTAL CLAIMS TSHS						

Signature

I certify that Mr/Mrs/Ms traveled

.....
Where he /she stayed for nights. I authorize payment of

His/her claims to the extend of Tshs Only. The claim is payable on
my item

Signature Designation

Date

APPROVED BY CHIEF ACCOUNTANT

I hereby certify that the amount of Tshs Is correct charge to
the Government.

Signature Designation

Date