

**MAFIA DISTRICT COUNCIL
RETIREMENT OF SAFARI/SPECIAL IMPREST (in triplicate)**

Name of Officer..... Designation.....
 Department.....Account No.....
 Imprest No.....of 200.... Issued by P.V. No.....of T.shs.....

A: OFFICER'S CERTIFICATE

I certify that i traveled towhere I stayed for.....Nights and the purpose of traveling was

I accomplished my mission/duty on.....and reported to my office on.....

However, on the course of my duty I incurred the following costs:

DATE	TICKETS/CERFICATES	ACTIVITY	AMOUNT

TOTAL

.....
DATE

.....
OFFICER'S SIGNATURE

B: CERTIFICATE BY HEAD OF DEPARTMENT.

I certify that the above amount is reasonable and the officer has satisfactorily performed the said duties. I also certify that the funds are available in the expenditure item.

Date..... DESIGNATION..... SIGNATURE.....

C: COMMENT OF THE TREASURER.

I have checked the accuracy and validity of the retirement.
 I therefore recommend that the retirement be/not be approved for the following reasons:.....

Date SIGNATURE.....
DISTRICTTREASURER

D: DIRECTOR'S APPROVALThis imprest retirement is approved/not approv
Date..... SIGNATURE.....

MAFIA DISTRICT COUNCIL

RETIREMENT OF SPECIAL IMPREST (in triplicate)

Name of Officer..... Designation.....
 Department.....Account No.....
 Imprest No.....of 200.... Issued by P.V. No.....of T.shs.....

A: OFFICER’S CERTIFICATE

I certify that I’ve accomplished my duty/Mission of.....

 of which the imprest was given.

However, on the course of my duty I incurred the following costs:

DATE	TICKETS/CERFICATES	ACTIVITY	AMOUNT
		TOTAL	

.....
DATE

.....
OFFICER’S SIGNATURE

B: CERTIFICATE BY HEAD OF DEPARTMENT.

I certify that the above amount is reasonable and the officer has satisfactorily performed the said duties.

Date..... DESIGNATION..... SIGNATURE.....

C: COMMENT OF THE TREASURER.

I have checked the accuracy and validity of the retirement.
 I therefore recommend that the retirement be/not be approved for the following
 reasons:.....

Date **SIGNATURE.....**
DISTRICTTREASURER

D: DIRECTOR’S APPROVAL

This imprest retirement is approved/not approved
Date..... SIGNATURE.....