

Transport Allowances Voucher

P6

Organisation No.

--	--	--	--	--

Voucher Number

--	--	--	--	--	--	--	--	--	--

Ministry/Department

Event Number

--	--	--	--	--

FP

--	--

Commitment Regn No.

--	--	--	--	--	--	--	--

Accounting Period

--	--

Fiscal Year

20___/20___

Year month Day

20					
----	--	--	--	--	--

Name of OfficerMake of Vehicle

Motorcar Commuted/Upkeep allowance atper annum \$ _____
 Or
 Motorcycle Actual Mileageatper Km \$ _____
 Passenger Mileage.....atper Km \$ _____
 Toll Charges \$ _____
 Total \$ _____

I hereby certify upon honour that I have, during the month ofperformed the travelling set out overleaf and have kept in my possession/or as my own property afor which the allowance as provided in the Staff Orders for the Public Service 2004 is payable to me, and that the said.....has not been let out for hire. I further certify upon honour, that all travelling on private business or pleasure has been excluded from the total mileage making up this claim

.....		Signature of Claimant	Date
I hereby certify that I have examined this claim and found it to be for travelling on duty only, and the trips made and mileage incurred have been necessary for the proper performance of the officer's duties		Document	Expiry Date
.....		Driver's Licence	
Certifying Officer		Motor Vehicle Registration Certificate	
Date		Motor Vehicle Certificate of Fitness	
		Motor Vehicle Insurance Certificate	

CLASSIFICATION	LINE NO 01	LINE NO. 02	LINE NO. 03
Function/Subfunction			
Programme/SubProg.			
Activity/Project			
Sub-Activity/Project			
Object/Sub Object			
Amount \$			
Amount in Words		Tax Registration Number (TRN)	CTMS Ref #/ Cheque No.
			Total \$

Voucher Processing Details	Authorisation (Finance &Accounts Division/Branch/Unit) (Accountable Officers)
Checked by _____	I certify that this voucher has been properly prepared ,the payee entitled to the amount stated herein, the calculations are correct ,according to regulations and contract, and that funds are available.
Posted by _____	_____ Certifying Officer _____ Authorising Officer

