## CLAIM FOR SUBSISTENCE ALLOWANCE AND RETIREMENT OF TRANSPORT CHARGES AND OTHER INCIDENTAL EXPENSES

	Part: I Particu	llars of clain	mant							
	Name:				Voucher No:					
					Date:					
	Designation:			••						
	Department:					Allocation code				
	Ministry /Prov	ince:								
	Postal Address	s:								
					Checked by:(Name and Signature)					
Date		Date	departed	Date	Arrived at	Purpose of journey	No. of	Rate per	amount	
Dute		departed from	from	Date	7 milved at	1 urpose of journey	nights	night	amount	
(a)	Subsistence Allowance									
(b)	Transport charges and other incidental expenses (give details and attach receipts)									
Authori	ty					Total K				
	NOTE: Where cl accommodation v			ills, recei	pted accounts r	must be attached together	with proof t	hat cheaper		
					Part II					
	I certify that the j	ourneys were	under taken	on goveri	nment business	;				
	•	•				(signature of claima	nt)			
					Part III					
				a ve		ce				
	To a Control do a				e by supervisir					
	I certify that the j	ourneys were	authorized a	nd that th	e claim is corre	ect in every detail				
					(Signature	of supervising officer)				
					PART IV					
	Certificate by per	rmanent secre	tary or head	of departn	nent					
	Certificate by per Payment of the cl		-	_						
	Payment of the cl	laim is author	ized			nent Secretary or Head of	Department			

Date

\*Delete as appropriate