

Construction

Another Hope Children's Ministries

Payment Request Form.

**PART A (To be completed by the applicant)**

STATION Nansana DATE 7/1/13  
APPLICANT'S NAME Batuker PAYABLE TO Mwape  
AMOUNT (Figures) 200,000  
AMOUNT (Words) Two hundred thousand shs.  
PURPOSE FOR REQUEST Small stones

APPLICANT'S SIGNATURE [Signature]

**PART B (To be completed by the Head of Department)**

MONEY IN THE BUDGET YES ☒ NO ☐ ON ACCOUNT Yourselves  
CHECKED RECOMMENDED BY  
NAME Kusemwa Aisy DESIGNATION \_\_\_\_\_  
SIGNATURE Kusemwa DATE 8/1/13  
AMOUNT RECOMMENDED 200,000

**PART C (To be completed by the Director or anyone standing in for her/him)**

APPROVED BY  
NAME KASOZI DANIEL DESIGNATION [Signature]  
SIGNATURE [Signature] DATE 8/1/13  
AMOUNT APPROVED 200,000

**RECEIVED BY**

NAME Mwape SIGNATURE [Signature] DATE 8/1/13

All the necessary accountabilities must be attached to this form after  
Payments are made e.g. receipts, invoices. (F&A Finance & Administration,  
PC Project Coordinator, ED Executive Director)