

Another Hope Children's Ministries

Payment Request Form.

PART A (To be completed by the applicant)

STATION Nansana DATE 8/1/13

APPLICANT'S NAME Batuca PAYABLE TO Kasim

AMOUNT(Figures) 200,000=

AMOUNT (Words) Two Hundred thousand shs

PURPOSE FOR REQUEST Water for home construction
at Kenna.

APPLICANT'S SIGNATURE [Signature]

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

MONEY IN THE BUDGET YES ☒ NO ☐ ON ACCOUNT _____

CHECKED RECOMMENDED BY
NAME Kusemela Cissy DESIGNATION Ac/Proc.

SIGNATURE Kusemela 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 8th/1/13

AMOUNT APPROVED 200,000

RECEIVED BY

NAME Kasim SIGNATURE [Signature] DATE 8th-1-2013

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)