

## PAYMENT VOUCHER

	Date: 05/01/2021	PV No:2020: WC,	
	Payee's Name: Latifa Hamis Payee's Code: Address: Mbagala kiziani VRN:	TIN:	
	Payment in respect of:  Vo cational reille facilité  Finns  To Be Pald From: World Connect	Apply Date: Invoice No: LPO No: Invoice Date: LPO Date: Delivery Date: Payment Method: Terms of Payment:	OS (O ( DOZ)
ACCOUNT ENTRIES:			
- Indiana	BUDGET LINE	ACCOUNT DESCRIPTIONS	AMOUNT
		Laking care training for	200,000 -
[		[Esipments]	700,000 E
1	TOTAL		900,000F
	AUTHORITIES:	* (	
		under of thousand.	is correctly payable to
above-named person/company and that the rates of payment/price(s) Is/are in accordance with Regulations/the Terms of the Contract and the			
funds are available under the budget line of the specified activity and item quoted above to meet this payment.			
	Prepared by: innocent Great Examined By:	Prisce stembuli	Approved By: Serilic Shirim
	- AO:_	<b>P</b> \	
	Signature Signature	1 1-	Signature
	Date: 0 5 Date: 0 5	101/2021	Date: 05/01/2021