

Finance Form 10 Rev. Nov. 78 <div style="text-align: center;">PAPUA NEW GUINEA</div> <div style="text-align: center; font-size: 1.5em; font-weight: bold;">WAGES SHEET</div> DEPARTMENT / OFFICE					Departmental Reference No.		C.F.C No.		Vote to be charged (Column 1)				
									Division	F	Act	Item	Commitment No.

Name	Occupation	Period		Fortnightly Wages	Gross	Fortnightly Deductions			Net	Signature of Payee & Date	I certify that this account is correct Signature & Date (Financial Delegate) Designation								
		From	To			Tax	Housing												
		1	2			3	4	5											
											<div style="text-align: center; border: 1px solid black; padding: 2px; font-weight: bold;">FOR PAYING OFFICE USE</div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Registration No.</td> <td style="width: 50%; text-align: center;">Consec. No.</td> </tr> <tr> <td style="height: 40px;"></td> <td></td> </tr> <tr> <td style="text-align: center;">Date of Regist- ration</td> <td style="text-align: center;">Not Previously Paid</td> <td style="text-align: center;">F.D's Signature Verified</td> <td style="text-align: center;">Examined</td> </tr> </table> <div style="margin-top: 10px;"> I certify that this account is correct within the meaning of the <i>Public Finances</i> <i>(Management) Act</i> <div style="display: flex; justify-content: space-between;"> (Certifying Officer)/...../..... (Date) </div> </div>	Registration No.	Consec. No.			Date of Regist- ration	Not Previously Paid	F.D's Signature Verified	Examined
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Date of Regist- ration	Not Previously Paid	F.D's Signature Verified	Examined																
Gross (Column 1)kina toea											We certify that the persons named in this Pay Sheet have this day been paid the net amounts set opposite their name in our joint presence. <div style="display: flex; justify-content: space-between;"> (Paymaster)/...../..... (Date) </div> <div style="margin-top: 10px;"> (Withness) </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> (Date) </div>								

N.B.- Total of the deductions as per Column 2,3 and 4 credited to Revenue on Receipt No..... Dated.....

Accounting Officers operating on imprest advances must enter Gross Total (Column 1) on the Payment schedule - Form 11. The Receipt number covering deductions will be entered on the Receipts dchedule - Form 12.