

PAPUA NEW GUINEA

Department of Finance and Planning

.....

...../...../.....

EXAMINATION OF ACCOUNTS

Voucher(s)
 Number(s)

The attached Documents are forwarded for action as indicated:-

- | | |
|--|-------|
| 1 For signature of Financial Delegate..... | |
| 2 For endorsement of relevant expenditure vote..... | |
| 3 To pay please..... | |
| 4 For attachment of ILPOC, FF4 etc..... | |
| 5 For attachment of Invoice/ or Supporting Documents..... | |
| 6 For signature of Receiving Officer / Claimant..... | |
| 7 For funded requisition / Cash Fund Certificate number..... | |
| 8 For your commitment action and | |
| | |

Should any alteration be necessary, effect same on the original registered claim and return the claim for payment with this Memo attached.

Please complete and return these Vouchers within seven days.

.....
 Senior Examiner: Phone:.....