Uva Wellassa University



Advance Payment Voucher

Name of the Officer Requesting Advance :	Account Code :	
Designation :	Cheque No :	
Division :	Voucher No :	

Section – A

Please grant a sum of Rs. :

In Words :

Name of the Expenditure/ Project Name/ Vote :

To be utilized for the under mentioned program/ Procurement :

No.	Item Description	No. of items (if applicable)	Unit Price (if applicable)	Total Value Rs.
1				
2				
3				
4				
5				
	Total			

I agree to settle the advance immediately on completion of program/ procurement or within a period of 30 days whichever comes first

Signature of the Requesting Officer

Date

Section – B

Recommendation

I have carefully examined the expenditure items, rates etc. and have made necessary alterations as shown above the request recommended.

Amount Requested	Rs. :
Amount Recommended	Rs. :
Recommend by	
Date (DD/MM/YY)	

Section – C

Payment Approved by		
5 11 5	Signature of the Approving Officer	Date
Payment Certified by		
	Signature of the Certifying Officer	Date
Section – D		
Received a sum of Rs.:	In Words :	

Signature of the Requesting Officer

Date