TEACHERS SERVICE COMMISSION

Telephone: 2892000/0722-208-552

Web: www.tsc.go.ke
Email: info@tsc.go.ke



TSC HOUSE
KILIMANJARO ROAD
UPPER HILL
PRIVATE BAG- 00100
NAIROBI, KENYA

ED ALL
FROM THROUGH
TSC/ACC/13- APPLICATION FOR IMPREST
PART 1: To be completed by the imp rest applicant in duplicate (a) Name
(d) Bank /Branch
 (f) Date of departure
(i) Proposed itinerary(j) Number of days to be away(k) I certify that I have/have no previous outstanding imp rest SignatureDateDate
PART 11 OTHER CERTIFICATES
(a) To be completed by the Vote Book Holder signaling ability to meet this expenditure:
Date Signature vote
(b) To be completed by the imp rest control officer I certify that the officer an/ no outstanding imp rest
NumberDateFor Kshs
Date Signature (Officer In Charge of Imp rest
PART 111 AUTHORISATIONS Approved/Not approved imp rest of Kshs



CS/D(F)