|  |  |  |
| --- | --- | --- |
|  | **THE JUDICIARY**  **DAGORETTI COURT STATION**  **F.O 24 IMPREST WARRANT (Revised)**  **Imprest Type: Safari** |  |
| Tel: +254 20 3525785 Dagoretticourt@court.go.ke |  | P.O Box 58 Dagoretti, Kenya  www.judiciary.go.ke |

**Details of Imprest Applicant**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant’s Full Name** | **PJ No.** | **Designation** | **JSG** | **DSA**  **Rate** | **Tel. No.** | **Imprest Type** | **Admin Unit** |
| *Gerald Machoka Onkendi* | *51831* | *Senior Accountant* | *4* | *15,000* | *0723676229* | *Safari* | *Supreme Court* |

**Details of Workplan Activity**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **STAJ Outcome** | **Objective** | **Activity** | **Venue** | **Days** | **Start** | **Stop** |
| A Strong Institution that is Independent, Accessible, Efficient, and Protects the Rights of all, especially the Vulnerable | Enhance Access to Legal Information | Retreat to Develop, Publish & Disseminate Court Publications | Naivasha | 10 | 31/03/24 | 09/04/24 |

**Resource Requirements**

|  |  |  |
| --- | --- | --- |
| **Inputs** | **Budget Item** | **Encumbrance Amount** |
| Travel Costs - Domestic | 2210301 | - |
| Accommodation - Domestic | 2210302 | 112,500.00 |
| Daily Subsistence Allowance - Domestic | 2210303 | 37,500.00 |

**Certificates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Workplan & Finance Certificate** | **AIE Holder Certificate** | **Examination & Validation** | **Authorization Certificate** |
| I certify that the expenditure is provided for in the approved workplan and adequate budget to cover it is available under the ledger items | I certify that the expenditure detailed above has been incurred for the authorized purpose and should be charged to the ledger item shown here below; | Payment voucher examined and validated by; | I certify that the rate/price charged is according to regulations/contract, is fair & reasonable, that the expenditure has been incurred on proper authority and should be charged as under. Where appropriate all certificates have been completed. I hereby AUTHORIZE payment of the amount shown without alteration |
| *Insert name here* | *Insert name here* | *Insert name here* | *Insert name here* |
| *Insert Digital Signature here* | *Insert Digital Signature here* | *Insert Digital Signature here* | *Insert Digital Signature here* |
| *Insert Date* | *Insert Date* | *Insert Date* | *Insert Date* |

Payee Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PV. No.** | **Staff No.** | **Payee/Supplier Name** | **Payee Bank** | **Branch** | **Account No.** |
| 000489 | 51831  153123 | Gerald Machoka Onkendi | KCB | KICC | 1118771859 |

**Supporting Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sno.** | **Doc. Description per checklist** | **Doc. No.** | **Doc. Date** | **Link to EDMS** |
|  | User Expenditure Request Memo | 000005 | 30-03-2024 | https://bit.ly/2G4JkN8 |
|  | Workplan | WP986 | 14-06-2022 | https://bit.ly/2FKr8tZ |

**Payer Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Paying Bank** | **Branch** | **Account Name** | **Acc. No.** | **Posting Date** | **Payment Date** |
| KCB | Dagoretti | Expenditure | 1259734218 | Final approval in ERP | Transmission date in Q-Pay/IB |

**Certificates**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Workplan & Finance Certificate** | **AIE Holder Certificate** | **Examination & Validation** | **Authorization Certificate** | | |
| I certify that the expenditure is provided for in the approved workplan and adequate budget to cover it is available under the ledger items | I certify that the expenditure detailed above has been incurred for the authorized purpose and should be charged to the ledger item shown here below; | Payment voucher examined and validated by; | I certify that the rate/price charged is according to regulations/contract, is fair & reasonable, that the expenditure has been incurred on proper authority and should be charged as under. Where appropriate all certificates have been completed. I hereby AUTHORIZE payment of the amount shown without alteration | | |
| *Insert name here* | *Insert name here* | *Insert name here* | *Insert name here* | | |
| *Insert Digital Signature here* | *Insert Digital Signature here* | *Insert Digital Signature here* | *Insert Digital Signature here* | | |
| *Insert Date* | *Insert Date* | *Insert Date* | *Insert Date* | | |
| **Chart of Accounts Distributions** | | | | | |
| **SCOA Combination** | | | | **Spending Unit** | **Amount** |
| 20100-2010013590-13021000-0-15090100-3111112-39605201-000181234-SP-SP-1710  [Vote-Admin-SOF-Class-S/Prog-Ledger-Geog-Project-SP-SP-Ext. Rep] – Purchase of ERP Software (Display the ledger item description only) | | | | Dagoretti MC | 23,789,456.00 |
| *Display the code combination for 2% withholding VAT – Ledger item description* | | | | Dagoretti MC | -410,173.38 |
| *Display the code combination for 5% withholding tax - Ledger item description* | | | | Dagoretti MC | -1,189,472.80 |
| *Display the code combination for 10% retention - Ledger item description* | | | | Dagoretti MC | -2,378,945.60 |

*Note: Let the payment voucher display only the relevant/signed payment vouchers.*

