

UNIVERSITY OF EDUCATION, WINNEBA

M06 - SPECIAL ADVANCE RETIREMENT FORM

Part A - Details of Applicant

Name: _____ Telephone Number: _____

Faculty/Department/Division/Section: _____

Part B - Details of Special Advance Taken

Amount : GH¢ _____

PV Number: _____

Date (DD/MM/YYYY): _____

Cheque Number: _____

Part C - Details of Expenditure Made

Please provide details of the expenditure paid with the special advance and attach relevant receipt(s).				
SN	Item	SRV Number*	GL Code <i>(Official use only)</i>	Amount (GH¢)
Total Expenses				
Less Special Advance Taken				
Excess Expenditure (See below)				
Unused Special Advance (Refunded per Receipt No.:.....)				

* Please quote number and attach copy of Stores Receipt Voucher (SRV) for asset/general stores purchased.

Applicant's Declaration *(Please read carefully before signing)*

- I understand that no refund will be made to me in respect of excess expenditure for which the prior approval of the Finance Officer was not obtained.
- I have attached the relevant receipts and SRV certified by the University Stores Superintendent and Internal Audit in support of this retirement.
- I confirm that any asset(s) purchased with the special advance being retired has been duly labelled and entered into my Departmental Asset Register.

Signature of Applicant

Date(DD/MM/YYYY)

Part D - Certification by Head/Dean

Head/Dean

Signature

Date(DD/MM/YYYY)

Part E - Certification by the Internal Auditor

We are satisfied that the expenditure incurred is genuine and supported by relevant receipts and other documentation

Signature of Internal Auditor

Date(DD/MM/YYYY)

This Form has been designed in accordance with Section 15.2.1 of the University's Financial and Stores Regulations. It is to be used only for the claim for which it is meant.