SCHOOL PAYMENT VOUCHER

(Not to be used for travel or kilometreage allowance claims)

Department of Education

Dr to:

Name of Claimant:			
Address:		Postcode	Telephone

Details

Date of supply or period of service	Particulars (attach relevant supporting document if applicable)	Account Code	GST Code	Amount
			Total	

Payee Bank Account Details

Account Name			
BSB			
Account Number			
Customer Reference number		Total Amount	

Cheque Payment Details

Paid by Cheque No		Total Amount	

Certification by Incurring Officer

I certify that this Account is correct in respect of the requirements of Treasurer's instruction 304(4)(i) to (vii).

....
(Name) (Signature) (Date)

Authorisation by Certifying Officer

I certify that this Account is correct in respect of the requirements of Treasurer's instruction 304(4).

....
(Name) (Signature) (Date)

CC BY

Department of Education WA 2014