Province of the

EASTERN CAPE
EDUCATION

ORDER NO.

Z	W																

PAYMENT NO.

P	M																

DESCRIPTION

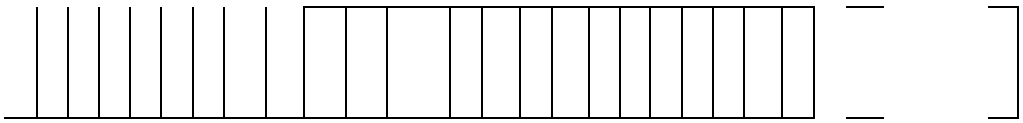
SUPPLIER NAME AND ADDRESS

Captured by	
Date Captured	
Pre-authorised by	
Date Pre-authorised	
Authorised by	
Date Authorised	

BANKING DETAILS

BANK	
BRANCH	
ACCOUNT NO.	
ACCOUNT TYPE	

ITEM LINE NO	INVOICE DATE	INVOICE NO	DOCUMENT TYPE	AMOUNT

	COMPILED BY	CHECKED & VERIFIED BY	EXPENDITURE AUTHORISED BY DEPUTY DIRECTOR: FROM 0 TO 999
SIGNATURE			
PRINT NAME			
RANK			
DATE			

	DIRECTOR:1 M TO 1999M	CHIEF DIRECTOR: FROM 2 TO 5 M	CFO: FROM 5 M TO 30 M	SG: FROM 30M UP
SIGNATURE				
PRINT NAME				
RANK				
DATE