

## Province of the

## EASTERN CAPE EDUCATION

|              |       | ORDER NO.                 |        |     |             |                         |   |     |          |   |   |      |                               |   |   | _ | Captured by |                                |                           |                   |                 |   |
|--------------|-------|---------------------------|--------|-----|-------------|-------------------------|---|-----|----------|---|---|------|-------------------------------|---|---|---|-------------|--------------------------------|---------------------------|-------------------|-----------------|---|
| Z            | W     |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           | Date Captured     |                 |   |
|              | •     |                           | •      | •   | •           | •                       | • |     |          |   | • | •    |                               |   |   | • | •           |                                | •                         | Pre-authorised by |                 |   |
| PAYMENT NO.  |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             | Date Pre-authorised            |                           |                   |                 |   |
| Р            | M     | PATI                      | VIEIVI | NO. |             | 1                       |   | l l | T T      | ſ |   | 1    | T                             | ſ |   |   | 1           |                                | 1                         | Authorised by     |                 |   |
| Ŀ            | 1     | 1 1 1                     |        |     |             |                         |   |     |          | l |   |      |                               | I | 1 |   |             |                                | 1                         | Date Authorised   |                 |   |
|              |       | DESCRIPTION               |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   | _               |   |
| Г            |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | 1                         |                   | BANKING DETAILS |   |
| _            |       | SUPPLIER NAME AND ADDRESS |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             | 4                              |                           |                   |                 |   |
| Г            |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | 1                         | BANK              |                 |   |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | 1                         | BRANCH            |                 | _ |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           | ACCOUNT NO.       |                 | _ |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | 1                         | ACCOUNT TYPE      |                 |   |
|              |       |                           |        |     |             |                         | 1 |     | <u> </u> |   |   | 1    |                               |   | 1 | 1 | 1           |                                | •                         |                   |                 |   |
| ITEM LINE NO |       |                           |        |     |             | INVOICE DATE INVOICE NO |   |     |          |   |   |      |                               |   |   |   |             |                                | DOCUMENT TYPE             | AMOUNT            |                 |   |
|              |       |                           |        |     |             |                         |   |     |          |   |   | -    |                               |   |   |   |             |                                |                           |                   |                 |   |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           | 1                 |                 |   |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   | 1               |   |
| L            |       |                           |        |     |             | l                       |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   |                 | J |
| Г            |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | EXPENDITURE AUTHORISED BY | 7                 |                 |   |
|              |       |                           |        |     | COMPILED BY |                         |   |     |          |   |   |      |                               |   |   |   |             | DEPUTY DIRECTOR: FROM 0 TO 999 |                           |                   |                 |   |
|              |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             | 1                              |                           |                   |                 |   |
| 210          | SNATI | JKE                       |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             | 4                              |                           |                   |                 |   |
| PR           | INT N | AME                       |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             | _                              |                           |                   |                 |   |
| RANK         |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   |                 |   |
| DATE         |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   |                 |   |
| -            |       |                           |        |     |             | ı                       |   |     |          |   |   | -1   |                               |   |   |   |             |                                | 1                         | <b>-</b>          |                 |   |
|              |       |                           |        |     |             | DIRECTOR:1 M TO 1999M   |   |     |          |   |   | CHII | CHIEF DIRECTOR: FROM 2 TO 5 M |   |   |   |             |                                | CFO: FROM 5 M TO 30 M     | 7                 |                 |   |
| SIGNATURE    |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   | 1           |                                |                           |                   |                 |   |
| PRINT NAME   |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                | 1                         |                   |                 |   |
| RΑ           | NK    |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           | 1                 |                 |   |
| DATE         |       |                           |        |     |             |                         |   |     |          |   |   |      |                               |   |   |   |             |                                |                           |                   |                 |   |

