

UVA WELLASSA UNIVERSITY

Voucher No. :

Payment Voucher

Payable to :
Address :

Table with 5 columns: Date, Particulars of service rendered, work done or goods supplied, Account Code, Amount Rs., Cts.

Prepared by: Checked by: Recommended by:

Approved for Payment

Date: Signature of Approving Officer

I certify from personal knowledge/from the certificates in the relevant files/that the above supplies/services/works were duly authorized and performed and that the payment of Rupees..... and Cents..... In accordance with regulations/ contract fair and reasonable.

Date: Signature of Certifying Officer

Signature of Payment officer:

Date:

Received this..... (Day)..... (Month)..... 2023 in payment of the account overleaf the sum of Rupees and Cents

Date: Signature of Recipient