



**MASENO UNIVERSITY**  
**FINANCE DEPARTMENT**  
**ACCOUNTING FOR IMPREST**

Name:.....PF No.....Designation.....

Imprest No.....Imprest Amount (Kshs ).....

Accounting date..... Tel No.....

**DETAILS FOR EXPENDITURE (ACCOUNTABLE)**

Date	Nature of expenditure	Receipt No.	Amount
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

Total Expenditure Kshs.....

**Less: Imprest Amount** Kshs.....

Balance to be Refunded / Over-expenditure Kshs.....

Receipt No./ PV. No.....

**DECLARATIONS AND APPROVAL OF ACCOUNTING**

1. I certify that the above information is true and correct  
 Name.....Signed.....Date.....

**(Imprest holder)**

2. I certify that the above imprest has been properly accounted for  
 Name.....Signed.....Date.....

**(Head of Department)**

3. I have checked and verified the accounting of the above imprest  
 Name..... Signed.....Date.....

**(Imprest Examination Section)**

4. I have audited the accounting of the above imprest  
 Name..... Signed..... Date.....

**(Internal Audit)**

5. Approved / Not Approved and cleared from the Imprest Register  
 For: Finance Officer.....Date.....