



### Transaction or Request Lodgement Receipt

**Transaction or Request Description:** ANZ to ANZ Transfer  
**Transaction or Request Status:** Posted  
**Date / Time:** 17/03/2023 13:19  
**Transaction Number:** AGD23194

#### Transaction Details:

Account Transfer of SBD 2,500.00

From Account: 5691140

To Account: 5680795

Notes for Recipient: Vehicle General Services-5x NHA

Notes for Myself: Service work

Pay Date : 17/03/2023

#### Comments:

\*\*\*\*\* Authorisation Details \*\*\*\*\*  
 17/03/2023 13:19 Gregory Sale  
 Authorisation Required for : Transfer Between My Accounts (2A)  
 21/03/2023 09:13 Christian Nieng  
 Authorised -Transfer Between My Accounts  
 Comments : verified  
 21/03/2023 10:23 Debbie Ofaeri Sifoni  
 Authorised -Transfer Between My Accounts  
 21/03/2023 10:23 Debbie Ofaeri Sifoni  
 Transaction Processed  
 \*\*\*\*\*



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### Transaction or Request Lodgement Receipt

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**Transaction or Request Status:** Held for Authorisation  
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# PAYMENT VOUCHER

Payment: Voucher No:	 APPROVED BY EXECUTIVE DIRECTOR Signed <u>[Signature]</u> Date <u>21/3/23</u>
NAME: BILLY TAFEASU Address:	
IF DIRECT CREDITS ISSUED: BANK REF #: _____ Signed _____	APPROVED BY FINANCIAL CONTROLLER Signed <u>[Signature]</u> Date <u>17/3/23</u>

NHA CODE	GL NAME	FULL DETAILS OF CLAIM	AMOUNT
6-2506	Maintain - Motor Vehicles	Being for General service for 5 x NHA Vehicle.	\$2,500.00

Cheque No: IB TRANS \_\_\_\_\_ for \$2,500.00 Date 17/03/2023

Signature of claimant \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

Payment Voucher Prepared by [Signature] Date 17/03/23



# NATIONAL HOSTING AUTHORITY

REQUISITION NUMBER: NHA - 186/23

DEPARTMENT: NHA - Finance & Admin

## PURCHASE REQUISITION

QUANTITY	UNIT	DESCRIPTION (Full and clear details of payment)	PURCHASING OFFICER USE ONLY		
			SUPPLIER	ORDER NO.	COST
		Being for NHA Secretariate Servicing payment for five vehicle	Billy Tafoga		2,500.00
<b>TOTALS</b>					<b>\$ 2,500.00</b>
<b>Approval is requested to incur expenditure on the above</b> Estimated Cost (SBD): <u>\$ 2,500.00</u> Date: <u>16/03/2023</u> Requisition Officer (Name): <u>Eniel M</u> Sign: <u>[Signature]</u>			Account Code: <u>6-2506</u> Account Name: <u>Maintain - Motor vehicles</u> Funds available on this account: _____		
<b>Supervisors Certification (Accountable Officers):</b> Certifying Officer (Name): <u>Debrae Rence</u> Sign: <u>[Signature]</u> Post: <u>PC</u> Department: <u>NHA</u>			<b>Authority is granted for expenditure not exceeding:</b> SBD\$ _____ Signed: <u>[Signature]</u> Name: <u>[Signature]</u> Note: Authority for expenditure must be given by accounting officer or his/her deligated		
<b>Threshold Checklist</b> Payment requires one quote (10,000 below) <input type="checkbox"/> Payment requires three quotes (\$10,000.00 above) <input type="checkbox"/> Is it a ITB Contract Payment <input type="checkbox"/> Is it a GTB Contract Payment <input type="checkbox"/> Payment is a Bid Waiver <input type="checkbox"/>			Compliance Check by: <u>[Signature]</u> Signature Name: <u>Leeroy B</u> Date: <u>16/03/23</u> Position: <u>PCM</u>		





# NATIONAL HOSTING AUTHORITY

REQUISITION NUMBER: NHA - 186/23

DEPARTMENT: NHA - Finance & Admin

## PURCHASE REQUISITION

QUANTITY	UNIT	DESCRIPTION (Full and clear details of payment)	PURCHASING OFFICER USE ONLY		
			SUPPLIER	ORDER NO.	COST
		Being for NHA Secretariate Servicing payment for five vehicle	Billy Tafarasu	3/23	2,500.00
<b>TOTALS</b>					<u>\$ 2,500.00</u>

Approval is requested to incur expenditure on the above

Estimated Cost (SBD): \$ 2,500.00      Date: 16/03/2023      Account Code: 31256-2506

Requisition Officer (Name): Enaid M      Sign: [Signature]      Account Name: Maintain - Motor vehicle

Funds available on this account: \_\_\_\_\_

**Supervisors Certification (Accountable Officers):**

Certifying Officer (Name): Debbie Rence      Sign: [Signature]      Authority is granted for expenditure not exceeding:

Post: FC      SBD\$ 2,500.00

Department: NHA      Signed: [Signature]

Name: CMNY

Note: Authority for expenditure must be given by accounting officer or his/her deligated

**Threshold Checklist**

Payment requires one quote (10,000 below)	<input type="checkbox"/>
Payment requires three quotes (\$10,000.00 above)	<input type="checkbox"/>
Is it a ITB Contract Payment	<input type="checkbox"/>
Is it a GTB Contract Payment	<input type="checkbox"/>
Payment is a Bid Waiver	<input type="checkbox"/>

Compliance Check by: [Signature]      Signature

Name: Leroy B      Date: 16/03/23

Position: PCM



## Minute

**To:** Executive Director/NHA  
**Attention:** Financial Controller and Procurement and Compliance Manager  
**Date:** 16<sup>th</sup> March 2023

Dear ED,

**Subject:** Invoice – Billy Tafeasu

I refer to the underlined subject.

The attached invoice was put forward for undertaking general servicing for NHA Secretariate five (5) vehicles. Attached invoice is amounted to \$2,500.00

Your endorsement and approval on this matter.

Thank you kindly,

Ms. Janet Bateé Prakash  
HRM/Admin.

Approved  
16/3/23

ANZ Acc# 5680795

RECEIPT 0631101

Original

Date 16/3/23

Received From Billy Tafeasu

The sum of Two thousand

Five hundred dollars

Being for Services of five motor  
vehicles

\$2,500-00

  
Signature