

**LOCAL GOVERNMENT SERVICE COMMISSION OF TANZANIA**

**FORM 17**

**APPENDIX "X"**

**APPLICATION FOR ADVANCE /IMPREST**

T SHS.....

Made under regulation 163

**PART "A"**  
**APPLICATION**

1. Name of applicant  
.....  
Designation .....  
Check No.....  
Salary scale.....
2. I apply for advance/imprest as shown above for the following reason[s]  
.....  
.....  
.....
- 3 The outstanding balance on my account is Tshs.....  
As at.....
- 4 The recent advance\* /imprest was paid to me  
on.....200.....and now is cleared /still outstanding to extent  
of Tshs.....  
Excluding the previous advances \*/imprest. ....  
Date ..... Signature of applicant

**PART "B"**

**COMMENTS OF THE HEAD OF DEPARTMENT**

1. Recommendable / do not recommend the advance to be paid to the  
applicant for the reasons given below .....  
.....  
.....  
Date: ..... Signature .....
- Department: .....

**PART “C”**

**COMMENTS OF TREASURER**

According our books the position in respect of previous advance / Imprest as follows:-

Total outstanding to date Tshs. ....

(i) Date of recent advance/imprest .....200 .....

(ii) Amount of recent advance /imprest still outstanding Tsh.....

Therefore I recommend that .....

Date: .....

Signature: .....

Treasure: .....

**DECISION**

In the right of the facts, I approve\* do not approved/imprest applied for by

..... the extent of Tshs. ....

To be recoverable as under

.....

.....

Date:.....20.....

Signature .....District Executive /Town/Municipal/City Director

.....Council

I have received from the Treasury Cheque No. ....

Date .....20.....for...T.shs in respect of advance/imprest

Applied for on ..... 20 .....

Date .....20 .....Signature of Payee

Delete whichever is in applicable