TEACHERS SERVICE COMMISSION

Telephone: Nairobi

312067/68/78/89/91/93/96,312123/32

/45,312418/23 & 312535 Telegrams: "MWALIMU".

Nairobi

When replying please quote

Ref.Nº: TSC /



THE BAZAAR MOI AVENUE/BIASHARA STREET PRIVATE BAG NAIROBI, KENYA

DATE							
DATE.	 	 	 	 	 		

TRAVELLING EXPENSES CLAIM FORM

(FORM TO BE COMPLETED IN DUPLICATE)

NAME		TSC NO					
INSTITUTIO	N	GR/	\DE				
PAYPOINT.							
ACCOUNT N	NO						
DATE	DETAILS OF JOURNEY, HOTEL EXPENSES	DISTANCE	AMOUNT	CTS			
	TOTAL						
	or the expenses are in accordance with TSC Reg						
	SIGNATURE OF CLAIM The a SIGNATURE OF HEAD O	above claim is genuine					
Notes 1. All o 2. The	claims must be accompanied by necessary recestain must be signed by The Head of Institution	eipts and invoices. on.					

- The distance covered, capacity and vehicle registration should be indicated and copy of the log book attached where an officer uses his/her own vehicle.
- 4. Authority letter from TSC Agent should be attached in case of hiring vehicle. (Which should be prior to the hiring)
- 5. Claims by the head teachers should be forwarded by either PEO/DEO.
- 6. Claims should be submitted within three months period.
- 7. In case of interviews, attach 2 copies of interview invitation letter.