**Utilities Checklist**

Payee:

Amount:

Particulars:

Supporting Documents: Two (2) copies collated

*(Put N/A if not applicable)*

* + [ ]  Indorsement Letter from Head of Unit
	+ [ ]  Statement of Account
	+ [ ]  Summary of Statement of Account (if more than 1 SOA)
	+ [ ]  SARO (if applicable)

I hereby certify that above documents are complete and arranged as per checklist.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature over Printed Name / Date

Email Address:

Contact Number/s: