TREASURY

TREASURY ACCOUNTING SYSTEM

Request Form for the Reversal of Receipt(s) in TAS

Min/Dept:....

Tel No:

Email:....

To: Accountant-General

Grateful, if arrangement could be made for the reversal of the following entries in TAS:

DETAILS OF RECEIPT TO BE REVERSED				DETAILS OF NEW RECEIPT		
DATE	RECEIPT NO IN TAS	AMOUNT(RS)	REASON(S) FOR REVERSAL	DATE	RECEIPT NO IN TAS	AMOUNT (RS)
TOTAL				TOTAL		

Confirmation & Certification by OIC Finance:

I certify that the above receipt(s) has/have been checked against all supporting documents (Combined Remittance Voucher, ABF9A, and others) and Cashbook of the revenue collector. I confirm that the above reversal(s) pertain to incorrect entries in TAS. I have enclosed a copy of the "Combined Remittance Voucher & Receipt" with this Request Form.

Name:....

Date:....

Tel:....

Signature:....

(Officer-In-Charge of Finance)

Recommendation by Accounting Officer:

I confirm that all the necessary verifications have been carried out. I am satisfied with the justifications/reasons provided and I am recommending the reversal of above receipt(s) in TAS.

Name:.....

-

Tel:....

Signature:....

(Accounting Officer) *

(*Note: The Officer signing as Accounting Officer should not be below the rank of a Deputy Permanent Secretary)

For Use at The Treasury <u>Verified & Found Correct</u>	Approved/Not Approved:	<u>Processed By</u> :
Name:	Name:	Name:
Sig:	Sig:	Sig:
Date:	Date:	Date:

Treasury -Rabadia Building, Mere Barthelemy Street, Port-Louis

Tel No: 260 5000 Fax No: 213 3439