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CUSTOMER NAME & ADDRESS

COAST PROVINCIAL GENERAL HOSPITAL

USAID KEMSA MCP

MFL CODE : 11289

CUSTOMER ORDER NO.	EMB-3-021970-2017/2018
DELIVERY NOTE NO.	EMB-2-020045-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	MVITA
COUNTY	MOMBASA

DELIVERY NOTE / INVOICE

18/10/2017

Page 1 of 1

	DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
					ORDERED	ISSUED			
051E3000	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81187K100R	30/06/18	4	4	1		

Special Notes

MOMBASA COUNTY DISTRIBUTION OF RTKS ATTN : Thani
 Suleiman- 721590845 :: NOT FOR SALE



STORE KEPT BY: <i>Amal Akinyi on Mon Oct 16 17:10:17 2017 From kemsaco.ke</i>	SECURITY NAME: <i>Amal Akinyi</i>	DISPATCH DATE & TIME: <i>17/10/17 4 PM</i>	RECEIVING DATE & TIME: <i>19/10/17</i>
SIGNATURE & DATE: <i>[Signature] 17/10/17</i>	SIGNATURE & DATE: <i>[Signature] 17/10/17</i>	DISTRIBUTION MNGR: <i>[Signature]</i>	RECEIVING OFFICER: <i>[Signature]</i>
WHSE MANAGER:	COLLECTING VEH. REG: <i>KT 8212</i>	SIGNATURE & DATE: <i>[Signature]</i>	DESIGNATION: <i>[Signature]</i>
SIGNATURE & DATE:	COLLECTING OFFICER: <i>DAVID</i>	P/No: <i>0163080</i>	
	ID: <i>26882769</i>	DELIVERING VEHICLE:	ID: <i>0163080</i>
	TELEPHONE: <i>0704674774</i>	DELIVERING DRIVER:	TELEPHONE: <i>721260247</i>
	SIGNATURE & DATE: <i>[Signature] 17/10/17</i>	ID:	SIGNATURE & DATE: <i>[Signature] 19/10/17</i>
		TELEPHONE:	
		SIGNATURE & DATE:	

Customer Remarks:

Distribution: White: Customer, Pink: Finance, Blue: Logistics, Yellow: Warehouse/Store