

P.O. Box 47715 - 00100, Nairobi, Kenya.
 Tel: 0726 618521, 0726 618520 E-mail: info@kemsaco.ke, Web: www.kemsaco.ke
 Facebook: www.facebook/kemsakenya, Twitter: @Kemsaco_Kenya

CUSTOMER NAME & ADDRESS
 AFWAN MEDICAL CENTER
 USAID KEMSA MCP
 MFL CODE : 12866

CUSTOMER ORDER NO.	EMB-3-015023-2017/2018
DELIVERY NOTE NO.	EMB-2-015069-2017/2018
WAREHOUSE	Embakasi Warehouse
DISTRICT	KAMUKUNJI
COUNTY	NAIROBI

DELIVERY NOTE / INVOICE

14/10/2017

Page 1 of 1

ITEM NO.	DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
					ORDERED	ISSUED			
05TES069	FIRST RESPONSE HIV 1-2-0 CARDTEST	KIT X 30 TESTS	38D04178	31/03/19	1	1	1		

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATIN : Nahashon
 Marebe- 722898813 :: NOT FOR SALE

TOTAL VALUE

STORE KEEPER:	SECURITY NAME:	DISPATCH DATE & TIME:	RECEIVING DATE & TIME:
SIGNATURE & DATE:	SIGNATURE & DATE:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
W/HSE MANAGER:	COLLECTING VEH. REG:	SIGNATURE & DATE:	DESIGNATION:
SIGNATURE & DATE:	COLLECTING OFFICER:	DELIVERING VEHICLE:	P/No.
	ID:	DELIVERING DRIVER:	ID:
	TELEPHONE:	ID:	TELEPHONE:
	SIGNATURE & DATE:	TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	

Customer Remarks:

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



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CUSTOMER NAME & ADDRESS
 AFWAN MEDICAL CENTER
 GOK GF Counterpart Funds
 MFL CODE : 12865

CUSTOMER ORDER NO.	EMB-3-018025-2017/2018
DELIVERY NOTE NO.	EMB-2-019065-2017/2018
WAREHOUSE	Embakasi Warehouse
DISTRICT	KAMUKUNJI
COUNTY	NAIROBI

DELIVERY NOTE / INVOICE

14/10/2017

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	DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
					ORDERED	ISSUED			
05TES003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81089K100R	30/06/18	2	2	1		

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahashon
 Marobe- 72289813 :: NOT FOR SALE

TOTAL VALUE

STORE KEEPER:	SECURITY NAME:	DISPATCH DATE & TIME:	RECEIVING DATE & TIME:
SIGNATURE & DATE: 16/10/17	SIGNATURE & DATE: 16/10/17	16/10/17 4A	19-10-2017
WHSE MANAGER:	COLLECTING VEH. REG:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
SIGNATURE & DATE:	COLLECTING OFFICER:	SIGNATURE & DATE:	DESIGNATION: Lab Manager
	ID:	DELIVERING VEHICLE:	P/No.
	TELEPHONE:	DELIVERING DRIVER:	ID: 31854535
	SIGNATURE & DATE: 16/10/17	ID:	TELEPHONE: 22436968
		TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	



Customer Remarks:

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

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CUSTOMER NAME & ADDRESS
 AL AMIN NURSING HOME
 GOK GF Counterpart Funds
 MFL CODE : 18769

CUSTOMER ORDER NO.	EMB-3-018261-2017/2018
DELIVERY NOTE NO.	EMB-2-019552-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	KAMUKUNJI
COUNTY	NAIROBI

DELIVERY NOTE / INVOICE

14/10/2017

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ITEM NO.	DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
					ORDERED	ISSUED			
05TES003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81089K100R	30/06/18	1	1	1		

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS A TTN : Nahashon
 Marebe- 722899813 :: NOT FOR SALE

TOTAL VALUE

STORE KEEPER:	SECURITY NAME:	DISPATCH DATE & TIME:	RECEIVING DATE & TIME:
SIGNATURE & DATE:	SIGNATURE & DATE:	16/10/17 4:12	19-10-17 (a) 2:09 PM
WHSE MANAGER:	COLLECTING VEH. REG:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
SIGNATURE & DATE:	COLLECTING OFFICER:	SIGNATURE & DATE:	DESIGNATION:
	ID:	TD	Lab. Tech.
	TELEPHONE:	DELIVERING VEHICLE:	P/No.
	SIGNATURE & DATE:	DELIVERING DRIVER:	ID:
		ID:	TELEPHONE:
		TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	

Customer Remarks:

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CUSTOMER NAME & ADDRESS

BAHATI CLINIC

GOK GF Counterpart Funds

MFL CODE : 12878

CUSTOMER ORDER NO.	EMB-3-018034-2017/2018
DELIVERY NOTE NO.	EMB-2-019554-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	KAMUKUNJI
COUNTY	NAIROBI

DELIVERY NOTE / INVOICE

14/10/2017

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	DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
					ORDERED	ISSUED			
05TES003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81089K100R	30/06/18	1	1	1		

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahastion
 Marebe- 722898813 :: NOT FOR SALE

TOTAL VALUE

STORE KEEPER:	SECURITY NAME:	DISPATCH DATE & TIME:	RECEIVING DATE & TIME:
SIGNATURE & DATE:	SIGNATURE & DATE:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
WHSE MANAGER:	COLLECTING VEH. REG:	SIGNATURE & DATE:	DESIGNATION:
SIGNATURE & DATE:	COLLECTING OFFICER:	DELIVERING VEHICLE:	P/No.
	ID:	DELIVERING DRIVER:	ID:
	TELEPHONE:	DELIVERING DRIVER:	TELEPHONE:
	SIGNATURE & DATE:	ID:	SIGNATURE & DATE:
		TELEPHONE:	
		SIGNATURE & DATE:	

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CUSTOMER NAME & ADDRESS

BIAFRA LIONS CLINIC

GOK GF Counterpart Funds

MFL CODE : 12883

CUSTOMER ORDER NO.	EMB-3-018045-2017/2018
DELIVERY NOTE NO.	EMB-2-019695-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	KAMUKUNJI
COUNTY	NAIROBI

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14/10/2017

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DESCRIPTION	UNIT OF ISSUE	BATCH NO.	EXPIRY DATE	QUANTITY		BOX NO.	UNIT PRICE	TOTAL VALUE
				ORDERED	ISSUED			
05TES003 TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81089K100R	30/06/18	20	20	1-2/3		

**NAIROBI CITY COUNCIL
EASTLEIGH LIONS CLINIC**

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahashon
 Marebe- 722899813 :: NOT FOR SALE

Cpm TOTAL VALUE

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SIGNATURE & DATE:	SIGNATURE & DATE:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
WHSE MANAGER:	COLLECTING VEH. REG:	SIGNATURE & DATE:	DESIGNATION:
SIGNATURE & DATE:	COLLECTING OFFICER:	DELIVERING VEHICLE:	P/No.
	ID:	DELIVERING DRIVER:	ID:
	TELEPHONE:	DELIVERING DRIVER:	TELEPHONE:
	SIGNATURE & DATE:	ID:	SIGNATURE & DATE:
		TELEPHONE:	
		SIGNATURE & DATE:	

Customer Remarks:

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