

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
 CANA FAMILY LIFE CLINIC
 GOK GF Counterpart Funds
 MFL CODE : 12889

CUSTOMER ORDER NO.	EMB-3-018049-2017/2018
DELIVERY NOTE NO.	EMB-2-019366-2017/2018
WAREHOUSE	Embakasi Warehouse
DISTRICT	MAKADARA
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			
USTE003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81089K100R	30/06/18	16	16	1-2		

Special Notes

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

TOTAL VALUE

STORE KEEPER:	SECURITY NAME:	DISPATCH DATE & TIME:	RECEIVING DATE & TIME:
SIGNATURE & DATE:	SIGNATURE & DATE:	16/10/17 4R	17/10/17 1:30 PM
W/HSE MANAGER:	COLLECTING VEH. REG:	DISTRIBUTION MNGR:	RECEIVING OFFICER:
SIGNATURE & DATE:	COLLECTING OFFICER:	SIGNATURE & DATE:	DESIGNATION:
	ID:	DELIVERING VEHICLE:	P/No.
	TELEPHONE:	DELIVERING DRIVER:	ID:
	SIGNATURE & DATE:	ID:	TELEPHONE:
		TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	

Customer Remarks:

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

HEALTH CENTRE & MATER...
 CANA FAMILY LIFE EDUCATION...
 HEALTH CENTRE & MATER...
 Tel: 0793 444 247

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CUSTOMER NAME & ADDRESS

COPTIC MEDICAL CLINIC

GOK GF Counterpart Funds

MFL CODE : 12904

CUSTOMER ORDER NO.	EMB-3-018052-2017/2018
DELIVERY NOTE NO.	EMB-2-019638-2017/2018
WAREHOUSE	Embakasi Warehouse
DISTRICT	MAKADARA
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	81090K100R	30/06/18	25	25	1-3		

Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahashon
 Marebe- 722899313 :: 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:	TELEPHONE:	TELEPHONE:
	SIGNATURE & DATE:	SIGNATURE & DATE:	SIGNATURE & DATE:
		TELEPHONE:	
		SIGNATURE & DATE:	

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CUSTOMER NAME & ADDRESS

G K PRISON NAIROBI REMAND HEALTH CENTRE

GOK GF Counterpart Funds

MFL CODE : 13161

CUSTOMER ORDER NO.	EMB-3-018165-2017/2018
DELIVERY NOTE NO.	EMB-2-019755-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	MAKADARA
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	81090K100P	30/06/18	10	7	1-2		
05TES003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81090K100P	30/06/18	10	3	2		



Special Notes

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

TOTAL VALUE

STORE KEEPER: <i>ilnet.alinyi on Sun Oct 15 2017 From karnalidw@...</i>	SECURITY NAME: <i>17 From karnalidw@...</i>	DISPATCH DATE & TIME: <i>16/10/17 3P</i>	RECEIVING DATE & TIME: <i>17/10/17 9:38am</i>
SIGNATURE & DATE: <i>[Signature] 16/10/17</i>	SIGNATURE & DATE: <i>[Signature] 16/10/17</i>	DISTRIBUTION MNGR: <i>[Signature]</i>	RECEIVING OFFICER: <i>[Signature]</i>
W/HSE MANAGER:	COLLECTING VEH. REG: <i>26 540</i>	SIGNATURE & DATE: <i>[Signature]</i>	DESIGNATION: <i>LAB TECHNICIAN</i>
SIGNATURE & DATE:	COLLECTING OFFICER: <i>SIMON</i>	DELIVERING VEHICLE:	P/No: <i>88077851</i>
<i>[Signature] 16/10/17</i>	ID: <i>28705700</i>	DELIVERING DRIVER:	ID: <i>2610119</i>
	TELEPHONE: <i>0726101906</i>	SIGNATURE & DATE: <i>[Signature]</i>	TELEPHONE: <i>0713462300</i>
	SIGNATURE & DATE: <i>[Signature] 16/10/17</i>	ID:	SIGNATURE & DATE: <i>[Signature] 17/10/17</i>
	<i>Butto</i>	TELEPHONE:	
		SIGNATURE & DATE:	

Customer Remarks:

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CUSTOMER NAME & ADDRESS
 JAMAA MISSION HOSPITAL
 GOK GF Counterpart Funds
 MFL CODE : 12984

CUSTOMER ORDER NO.	EMB-3-018082-2017/2018
DELIVERY NOTE NO.	EMB-2-019673-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	MAKADARA
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			
05TE3003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81090K100R	30/06/18	4	4	1		



Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahashon
 Marebe- 722899813 :: 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:	ID:	TELEPHONE:
	SIGNATURE & DATE:	TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	

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CUSTOMER NAME & ADDRESS
 KALOENI HEALTH SERVICES
 GOK GF Counterpart Funds
 MFL CODE : 12999

CUSTOMER ORDER NO.	EMB-3-018089-2017/2018
DELIVERY NOTE NO.	EMB-2-019082-2017/2018
WAREHOUSE	Embakassi Warehouse
DISTRICT	MAKADARA
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			
06TES003	TEST KIT HIV DETERMINE 1/2	KIT X 100 TESTS	81090K100R	30/06/18	1	1	1		



Special Notes

NAIROBI COUNTY DISTRIBUTION OF RTKS ATTN : Nahashon Marebe- 72289813 :: 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:	ID:	TELEPHONE:
	SIGNATURE & DATE:	TELEPHONE:	SIGNATURE & DATE:
		SIGNATURE & DATE:	

Customer Remarks:

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