

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**

KATILINI DISPENSARY

GLOBAL FUND - HIV

MFL CODE : 12241

CUSTOMER ORDER NO.	EMB-3-019256-2017/2018
DELIVERY NOTE NO.	EMB-2-020576-2017/2018
WAREHOUSE	embakassi warehouse
DISTRICT	MUTOMO
COUNTY	KITUI

## DELIVERY NOTE / INVOICE

17/10/2017

Page 1 of 1

	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	38G0617S	31/05/19	1	1	1		

MOPHE 5  
 KATILINI HEALTH CENTRE  
 MUTUA  
 DATE: \_\_\_\_\_

**Special Notes**

KITUI COUNTY DISTRIBUTION OF RTKS ATM: Ryalo Mathew  
 Mutua- 714484578 :: 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.
	TELEPHONE:	DELIVERING DRIVER:	TELEPHONE:
	SIGNATURE & DATE:	ID:	SIGNATURE & DATE:
		TELEPHONE:	
		SIGNATURE & DATE:	

**Customer Remarks:**

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



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**CUSTOMER NAME & ADDRESS**

KATILINI DISPENSARY

USAID KEMSA MCP

MFL CODE : 12241

CUSTOMER ORDER NO.	MB-3-019256-2017/2018
DELIVERY NOTE NO.	MB-2-020576-2017/2018
WAREHOUSE	Mbakassi Warehouse
DISTRICT	MUTOMO
COUNTY	KITUI

## DELIVERY NOTE / INVOICE

17/10/2017

Page 1 of 1

	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	81187K100R	30/06/18	2	2	1		

**Special Notes**

KITUI COUNTY DISTRIBUTION OF RTKS ATTN : Kyalo Mathew  
 Mutua- 714494578 :: 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:	ID:	SIGNATURE & DATE:
		TELEPHONE:	
		SIGNATURE & DATE:	

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