**ANNEX 8**

**Report on Ageing of Cash Advances**

**Schedule of Advances to Officers and Employees**

**As of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Agency Name: Book No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Agency Code: Account Title:\_\_\_\_\_\_\_\_\_\_\_\_**

**Account Code\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | | **Date CA granted** | | **Particulars** | | **Reference** | | | **Total Amount** | **Amount Due** | | | | | | | **Remarks** |
| Less than 30 days | | 31-60 days | | 61-365 days | Over 1 year | | (state date of liquidation and reason why if liquidated after the cut-off date) |
| **A. Advances for Special Purposes** | |  | |  | |  | | |  |  | |  | |  |  | |  |
| 1. Local Travel | |  | |  | |  | | |  |  | |  | |  |  | |  |
|  | |  | |  | |  | | |  |  | |  | |  |  | |  |
| 2.Foreign Travel | |  | |  | |  | | |  |  | |  | |  |  | |  |
|  | |  | |  | |  | | |  |  | |  | |  |  | |  |
| 3. Special Activities/ Projects | |  | |  | |  | | |  |  | |  | |  |  | |  |
|  | |  | |  | |  | | |  |  | |  | |  |  | |  |
| **B. Advances to Regular** | |  | |  | |  | | |  |  | |  | |  |  | |  |
| Disbursing Officers | |  | |  | |  | | |  |  | |  | |  |  | |  |
|  | |  | |  | |  | | |  |  | |  | |  |  | |  |
| 1. Payroll | |  | |  | |  | | |  |  | |  | |  |  | |  |
| 2. Seminar/Conference | |  | |  | |  | | |  |  | |  | |  |  | |  |
| Expenses | |  | |  | |  | | |  |  | |  | |  |  | |  |
| **TOTALS:** | |  | |  | |  | | |  |  | |  | |  |  | |  |
| **Certified Correct:** |  | |  | |  | |  | **Approved by:** | | |  | |  | | |
|  |  | |  | |  | |  |  | | |  | |  | | |
|  | Head, Accounting Office | | | | | |  |  | | | Agency Head | | | | |
| **Verified by:** |  | |  | |  | |  |  | | |  | |  | | |
|  |  | |  | |  | |  | Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
|  | COA Audit Team Leader | | | | | |  |  | | |  | |  | | |

*Note: This Report on Ageing of Cash Advances shall be submitted by the Agency directly to COA. COA shall report to the IATF of the Agency’s compliance with the Ageing of Cash Advances Good Governance condition upon their receipt of the report.*