

**APPENDIX K/II**  
(Made under Standing Order K.17)

**THE UNITED REPUBLIC OF TANZANIA**  
**STANDING ORDERS FOR THE PUBLIC SERVICE**

**SUBSISTENCE ALLOWANCE FOR**  
**JOURNEYS ON TREATMENT**  
(To be attached to the claim)

I certify that it was necessary for Mr/Mrs/Miss.....  
of (organisation)..... (Station).....  
to attend this Hospital from..... to ..... (date)

.....  
Hospital

.....  
Signature of Officer in Charge

Date.....

**NOTE:** This certificate is to support a claim for Subsistence allowance in respect of a public servant who was required to leave his/her station to attend this Hospital.