PAYROLL DEPARTMENT REQUEST FOR PAYMENT



Please ensure all fields are completed (in BLOCK CAPITALS), if not payment will be delayed as document will be returned

PAYEE:					BANK DETAILS						
ADDRESS:					SORT CODE:						
					ACCOUNT No: 8 numbers only						
					BUILDING SOCIETY						1
					REFERENCE:						
E-mail (for remittance advice):					BANK OR BUILDING SOCIETY NAME:						
Please	supply relevant sup	porting documenta	tion and com	plete D	DETAILS with a full d	escription					
DETAILS									£		p
Contribution to living expenses for visitor from overseas					eas						
Visitor from:											
Period payment	t is for:										
Note: T	his is for sh	ort periods	of mine	or e	xpenses only	y ;					
accommod	dation, flight	s & other t	ravel sh	ould	d be claimed	on a					
	receip	ts basis on	form FF	P16a	a.					\perp	
				1		TOTA	L			\perp	
REQUESTED BY:											
DEPARTMENT:											
EXTENSION NO:			COMPAN								
REFERENCE: To Notify Supplier					DATE:						
16 characters r											
			Cadina Elin								
Coding Slip Date Stamp (Payroll Office use): Vendor number:				ber:		Voucher number (Payroll Office use):					
Coding Details:			Payment Total VAT Code								
General Ledger Code	Enter cost centre (8 characters) Code (n	re (8 characters) or Internal order (varied length) on first line <u>OR</u> Project Code (max 12 characters) on second line					L	ine Ite	em Text		
	Cost Centre >>>			 							
OR Project Code >>>									•	_	
	Cost Centre >>>										
OR Project Code >>>							1				
	Cost Centre >>>		<u>* </u>								
OR Project Code >>>		1 1 1 1				1	l	1 1			1
	Cost Centre >>>		1								
OR Project Code >>>	333 3340		<u> </u>				1				
On Project Code ///		Spending Departmen	1 1t	<u> </u>				Pavr	roll Offic	e	
P	repared by:	- pending pepar tiller		uthorised b	y (and date):				pproved:		