

# Multiple Beneficiary Payment Order

Date: \_\_\_\_\_

Payment Order No: \_\_\_\_\_

Prepared By: \_\_\_\_\_

## Payer Details

Name of Organization: \_\_\_\_\_

## Beneficiary & Payment Details

#	Beneficiary Name	Account Number	Bank & Branch	IFSC / SWIFT	Amount (INR)	Remarks
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
<b>Total Amount</b>						_____

## Prepared By

Name & Signature: \_\_\_\_\_

## Checked By

Name & Signature: \_\_\_\_\_

## Authorized Signatory

Name & Signature: \_\_\_\_\_

## Important Notes

- Ensure beneficiary bank details are accurate to avoid transaction failures.
- Verify the total amount before submission to the bank or finance department.
- Obtain signatures/approvals as per organization's internal controls and policies.
- Attach relevant supporting documents where required.
- This document should be kept confidential and used for authorized payments only.