

Cheque Payment Order

Date:	_____	Payment Order No.:	_____
Company Name:	_____	Department:	_____
Prepared By:	_____	Approved By:	_____

Payee Information

Payee Name:	_____
Address:	_____
Contact Number:	_____

Cheque Details

Cheque No.	Bank Name	Branch	Cheque Date	Amount
_____	_____	_____	_____	_____

Payment Particulars / Purpose

Prepared By

Checked By

Authorized Signatory

Important Notes:

- This Cheque Payment Order must be properly filled and duly authorized before cheque release.
- All details (amount, payee, cheque number, etc.) should be double-checked for accuracy.
- Supporting documents must be attached for audit and verification purposes.
- Unauthorized alteration or tampering may render this order invalid.
- Keep a copy of the completed order for company records.