

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.