

Professional Services Payment Requisition

Requisition No.

Date

Project / Client Name

Service Provider

Contact Person

Email

Service Period

Invoice No.

Description of Services Provided

Payment Details

Service / Task	Description	Hours / Qty	Rate	Amount
E.g., Consulting	Details	10	\$100	\$1,000
Subtotal				\$1,000
Taxes (if any)				\$0
Total Amount Due				\$1,000

Bank Details / Payment Instructions

Service Provider's Signature

(Name & Title)

Date

Authorized Client Representative

(Name & Signature)

Date

Important Notes

- Ensure that all fields are accurately filled out and supporting documents (invoices, timesheets) are attached if required.
- Payment requisition should correspond to the agreed contract terms and approved deliverables.
- Double-check banking information to prevent payment delays.
- This document serves as a formal request for payment and may require client authorization.
- Keep a copy for your records and confirm receipt with the client.