

# Standard Payment Disbursement Form

Date of Request:

## Payee Information

Payee Name:

Address:

Payment Method:

Bank Transfer

Bank/Cheque Details (if applicable):

## Disbursement Details

Description	Account Code	Amount	Notes
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount:

## Purpose / Justification

Requested by:

Name & Signature

Date

Approved by:

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Name & Signature

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Date

## Important Notes

- All fields must be completed and supporting documents attached where required.
- Approval is mandatory before payment is processed.
- Ensure the payment purpose is clearly stated and justified.
- Incorrect or incomplete forms may result in delays.
- Keep a copy of this form for your records.