

Standard Payment Voucher for Expense

Voucher No.: _____ Date: _____
Department: _____ Prepared By: _____
Payable To (Name): _____
Address: _____

Expense Details

#	Description	Account Code	Amount	Remarks
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
Total			_____	

Amount in Words: _____

Purpose / Reason for Payment:

Prepared By Checked By Approved By Received By

Date: _____ Date: _____ Date: _____ Date: _____

Important Notes:

- This voucher must be completed in full and all supporting documents attached.
- Ensure approval signatures are obtained before processing payment.
- Voucher serves as official record for expense transactions and audit purposes.
- Alterations or overwriting may invalidate the voucher.
- Keep a copy for department records.