

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Non Staff Payment Request (Bank Transfer Only)*** | | | | |
| **Date:** |  |  |  |  |
| **Payee:** |  |  |  |  |
| **Address:** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Email:** |  |  |  |  |
| **Contact No. :** |  |  |  |  |
| **Total Amount:** | € |  |  |  |
| **Research Grants/Other Funds** | | | | |
| |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  |  |  |  |   Cost Centre Accounts/Analysis   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  |  |  |  |  |   €  € | | | | |
| |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |  |  |  |  |  |  |   Cost Centre Accounts/Analysis Research/D Account  €   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  |  |  |  |  |   € | | | | |
| **Purpose of Expenditure:** | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
| **Receipt/Documentation Attached** | | | | |
| **Bank Information for EFT:** | | | | |
| IBAN No: |  |  |  |  |
| BIC No: |  |  |  |  |
| Bank Name: |  |  |  |  |
| *For payments of non euro accounts, please attach bank details* | | | | |
| **Approved by Head of School/Account Manager** | | | | |
| **Signature:** |  |  |  |  |
| **BLOCK CAPITALS - Authoriser:** | | | | |
| (Please ensure authoriser signature is filled in. Submit completed form to nonstaffpayments@ucd.ie) | | | | |