Guide to Submitting a Payment Requisition

1. Click on New Form



2. Enter the payee's name in the 'Payable to' field and any payment reference in the box below. Select your department from the drop-down list and enter the name of the person that will need to authorise the payment in the 'Approver' box.

Ac	ions 🗸 🔒	Save as draft X Close		\square			
	Draft						
	All and the second	Royal Hospital for Neuro-disability	Payment Requisition Form				
		The cost code must be	le must be filled in before submitting this form to the Accounts Department. No payment will be made unless this form has been properly authorised				
	Exper Requestor	nses	Department / Ward *				
	M Michae	el Lewis		~			
	Payable to *		Submission Date *				
$\overline{}$			07/02/2022				
<	Payment Refe	erence	Approver *				

 Begin adding the lines to the form by clicking on '+ Add' and completing the boxes. To delete a row, click on the three dots (see below) and select 'delete'. To add attachments, click on the three dots (see below) and select 'Add attachments'.

	Details of payment					
(+	Add					
	Type *	Description	Amount *	Cost Centre *	Expense Code *	Sub Analysis Code
	Select an option	v		V	V	
_						

4. Finally, enter the bank sort code and account number of the payment to be made. Then click on 'Actions>Submit Request'.

🗐 Summary		
Total Cost	Payment Method	Sort Code *
£0.00	Bank Transfer	
		Account No *
Actions V X Close		

- The request will be sent as an email to the approver for authorisation.
- If further changes or corrections are to be made the approver will reject the request with a relevant explanation. You will then receive an email notification of the rejection.
- On approval, it will be sent to the Finance department for processing and payment.