## **NATIONAL UNIVERSITY OF SINGAPORE**

## Request for Payment (RFP)

To: Shared Financial Service Centre			Date of Request:			
Please arr	ange for payment/reir	nbursement to:				
NUS Staff	No.	NUS Stud	lent ID			1
100 Otali i	110.	Noo olac				
Payee's N	ame (as in vendor mas	ter record):				
Currency:	S\$ / US\$ / Euro / Othe	are Am	ount:			
——————————————————————————————————————	- COV / Edio / Othe	Alli				
ourpose/P	Particulars of Payment	t:				
	t these expenses were					
=iectronic i	receipts enclosed (if the	ere are any) nave not	been submitted pre	eviously for claiming.		
	<del>-</del>					
Signature	of Payee <sup>1</sup> / Date					
	0.11					
or Depart	ment's Use:					
PK	Vendor / GL	Amount	GST Code	WBS No.	/ BA	
31						
Verified B	y:		Approved by:			
Name & Si	ignature / Date		Authoris	sed Signatory / Date	<u> </u>	
tailie & O	ignaturo / Date		(Approver	signature is not req		nents
			processed	d via VIM)		

Updated on 22 December 2014

<sup>&</sup>lt;sup>1</sup> This is required for reimbursement claims. Where the department is using this form for payment in accordance with the engagement letter issued/approval conveyed to the individual (e.g. for per diem allowance), this can be left blank. The copy of such letter/approval should be attached to this form.