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| --- | --- | --- | --- | --- |
| ***Ad Hoc Payment Request (Not for UCD Student Use)*** | | | | |
| **Date:** |  |  |  |  |
| **Payee:** |  |  |  |  |
| **Address:** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Email:** |  |  |  |  |
| **Contact No. :** |  |  |  |  |
| **Total Amount:** |  |  |  |  |
| **Purpose of Expenditure:** |  |  |  |  |
|  |  |  |  |  |
| **Receipt/Documentation Attached** | | | | | |
|  | | | | | |  |
| Name on Bank Account: | |  |  |  |  |
| IBAN No: | |  |  |  |  |
| BIC No: | |  |  |  |  |
| Bank Name: | |  |  |  |  |
| *For payments of non euro accounts, please attach bank details* | | | | | |
| **Approved by Head of School/Account Manager**  **Authoriser:**  **Signature:** | | | | | |
| **To be completed by the approver:**  **Research Grants/Other Funds** | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  |  |  |  |  |   Cost Centre Accounts/Analysis   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |  |  |  |  |  |  |   €  € | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  |  |  |  |  |   Cost Centre Accounts/Analysis Research/D Account   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |  |  |  |  |  |  |   €  € | | | | |
| (Digital Signature Required. Submit completed form to [nonstaffpayments@ucd.ie](mailto:nonstaffpayments@ucd.ie)) | | | | |
|  | | | | |