## **UNIVERSITY OF DUNDEE**

## **Application for Direct Debit**

## Please complete sections A to E in FULL

Appropriate documentation should accompany form with Bank Mandate and emailed to Accounts Payable at accountspayable@dundee.ac.uk.

Department will be informed if Direct Debit is to be actioned and Bank Mandate will be authorised by Finance Office.

From				Department			Ext. No.
SECTION A - Supplier Details							
Account / Reference Number				Supplier Name and Address			
Description of Goods / Services							
SECTION B - Description of Payments							
TICK Frequen	cy of Paymer	nts I	MONTHLY	QUARTERLY			ANNUALLY
Start Date		h Date	No. of Payments	NET Amount	VAT Amount	GROSS Amount	Total of Payments
Otal C Date	(if app	licable)		NET AMOUNT	VAT AMOUNT	CROSS AMOUNT	(if applicable)
SECTION C - Additional Charges (if applicable)							
Description of	f Payment				NET	VAT	TOTAL
SECTION D - Financial Ledger Code Allocation							
			oup Fund Source	Budget Centre	Nominal	TOTAL	
SECTION E - Department Authorisation Date							
Department Addionisation						Duto	
<u> </u>							
SECTION F - Finance Authorisation						Date	
					CC : CASH OFFICE		