

**UNIVERSITY OF DUNDEE
FOREIGN PAYMENT
EXTERNAL / HONORARY STAFF / STUDENT**

Please complete clearly all sections of this form in BLOCK CAPITALS.

Return the completed form to School/Directorate with supporting documents attached for onward transmission to: expenses.ap@dundee.ac.uk

ILLEGIBILITY AND / OR NON COMPLETION OF FORM MAY DELAY YOUR PAYMENT.

From	Department	Ext. No.
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1. BENEFICIARY DETAILS

Title	First Name	Surname
Full Address:		
Address (line 2):		
Country:		
E-Mail Address		

2. DETAILS OF CLAIM OR PAYMENT

Dates of Travel	Travel From	Travel To	Purpose of Journey		
DETAILS OF PAYMENT OR EXPENDITURE - Please list payment details below and number any receipts accordingly			Currency	Amount	Finance Use Only
1					
2					
3					
4					
5					

3. BANK DETAILS - IBAN / SWIFT MANDATORY WITHIN EU

Beneficiary Bank Account Name:
Beneficiary Bank Account Number:
Beneficiary Bank IBAN Number:
Beneficiary Bank SWIFT Code:
Beneficiary Bank Name and Address:
address line 2:
Country:

4. FINANCIAL LEDGER CODE ALLOCATION

Project	Project Type	Budget Group	Fund Source	Budget Centre	Nominal	Amount		State Currency of Payment
Project	Project Type	Budget Group	Fund Source	Budget Centre	Nominal	Amount		Total Amount in Currency
Project	Project Type	Budget Group	Fund Source	Budget Centre	Nominal	Amount		IF Sterling equivalent to be sent insert Total Below

Claimants signature	Date
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