Employee EFT Payment Details Form (Please refer to Pg 2 for instructions)

Vote:	Serial No:	
Vote Name:		
Tick as appropriate: New:		
A-Employee information (To be filled by Employee) Supplier Name/Employee Surname (as denoted in Banks) Maiden name: Other Names:		
Employee Number:		
Tin (Mandatory)	Applicable With	hholding Tax rate (6% or 15%)
Tel/Mobile:	Email:	
Principle Address:		
B-Bank Information:		
Bank Name: Branch Name:		
Bank Account: Currency:		
Foreign Accounts: SWIFT Code/SORT Code AND IBA Routing Number (USA)	AN Number (EU)	
C-Employee Signature		
Name Signature		Title: Date:
D-Verified by Human Resource De	epartment	
Name Signature		Title: Date:
E-Confirmed by Accounting Officer		
Name Signature		Title: Date:
F-Entered on the System by:		Supplier#
Name Signature		Title: Date:

A. INSTRUCTIONS FOR FILLING

- 1. Forms are in duplicate; original to be returned to MoFPED and the duplicate to be kept by the site.
- 2. This form has to be filled by an authorized person and endorsed by the personnel officer (for employees) or suppliers' representative for suppliers.
- 3. The applicable vote code is as in the IFMS Chart of accounts.
- 4. Request type must be indicated at all times (Change, New Delete)
- 5. For Employees, The employee number required is the payroll number and must be filled (if it exists indicate if not available)
- 6. For Suppliers, the supplier number required is allocated at point of entry.
- 7. Forms filled each month have to be serialized e.g. the first form filled in the April in shall take the form 07040001 where 04 is the month, 07 is the year and 001 is the serial number.
- 8. No serial numbers shall be skipped
- 9. Change request should fill only fields that have to be changed.
- 10. Supplier/Employee number cannot be changed.
- 11. New requests must fill all fields
- 12. Inactive request may only fill the supplier/employee number and name

B. Requirements

- 1. A copy of Tax Certificate or proof of Tax Registration
- 2. Proof of Bank Account details e.g. Bank Slip