**Miscellaneous Payment Request Form**

Credit Card and BACS Payments

|  |  |
| --- | --- |
| Individual Requesting Payment |  |
| Date |  |
|  | |
| Payable To |  |
| Value of Payment |  |
| Budget Codes |  |
| Purpose of Payment |  |
|  |  |
| Budget Holder Signature |  |
| Budget Holder Name |  |

Please staple all relevant paperwork to the reverse of this form and return it to finance. For online credit card orders please send an email link with the items/course to [finance@girlslearningtrust.org](mailto:finance@girlslearningtrust.org)

If the payment is to be made via BACS transfer, please complete the following details and allow three working days for this to be completed.

|  |  |
| --- | --- |
| Bank |  |
| Account Name |  |
| Sort Code |  |
| Account Number |  |