

Payment Authorization Voucher for Vendors

Vendor Information

Vendor Name

Vendor ID

Contact Person

Address

Email

Phone

Payment Details

Date

Payment Method

Invoice Number

Invoice/Payment Breakdown

| Description | Quantity | Unit Price | Amount |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total | | | <input type="text"/> |

Remarks / Purpose of Payment

Authorization

Prepared By

Name

Date

Checked By

Name

Date

Approved By

Name

Date