CFW payment requisition form template

Number of payment requisition form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of implementing agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project name and number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pay period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Serial no.** | **Worker’s ID** | **Name of worker** | **No. days worked** | **Daily rate**  | **Total**  | **Breakdown of total in available banknotes (for Finance)** |
| **1000** | **500** | **100** | **50** | **20** | **10** |
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|  | **Total** |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Requester** |  | **Received by** |  |  | **Budget holder approval** |  |
| Signature |  | Signature |  | Signature |  |
| Name |  | Name |  | Name |  |
| Title |  |  | Title |  | Title |  |
| Date |  |  | Date |  | Date |  |

Source: Cash-Transfer Programming in Emergencies (2006) Oxfam GB