Payment Request Form

**SBS Requisition**

# What to use this form for

* ***Raising a request for a purchase relating to an Epsom and St Helier Hospitals Charity Fund.***

NB Any payment request will need to be authorised by the relevant signatories. For payments under £1,000 it will require two Fund Advisor signatures and for payments over £1,000 it will require one fund advisor plus the Divisional Director.

# What you will need to complete and submit

***Complete for every request***

* *Payment Request Form completed and signed*
* *Quote from the relevant company(ies)*

# How to fill out this form

***Complete for every request***

* ***Section A:*** *Your Details*
* ***Section B:*** *Fund Details*
* ***Section C:*** *Payment Details*
* ***Section D:*** *Payee Details*
* ***Section E:*** *Authorisations*

# How to submit this form

Email a copy alongside your receipts to [esth.charity@nhs.net](mailto:esth.charity@nhs.net)

For any questions, please contact us directly on 01372 735 262.

**SECTION A: Your Details**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Full name: |  |
|  |  |
| Job title: |  |
|  |  |
| Directorate: |  |
| Email: |  |
|  |
|  |

|  |
| --- |
| **SECTION B: Fund Details** |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Fund Name: |  |
|  |  |
| Fund Code: |  |
|  |  |

|  |
| --- |
| **SECTION C: Payment Details** |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Total Amount Requested: |  |
|  |  |
| Purpose of Payment (full details): |  |
|  |  |
| Quotation Reference (If applicable): |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **SECTION D: Request Details Continued** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Quantity | Details of Goods/service |  | Unit Price (exc VAT) | Suggested Supplier |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Total (exc VAT): |  |  |

|  |
| --- |
| **SECTION E: Authorisation** |

Epsom and St Helier Hospitals Charity has a legal obligation to ensure all direct charitable expenditure is for ‘appropriate charitable’ use and in furtherance of the objects of the Charity. In addition to the approvals below, this expenditure request will require approval from the Charity team and in some circumstances could be denied.

Any payment request will need to be authorised by the relevant signatories. For payments under £1,000 it will require two Fund Advisor signatures and for payments over £1,000 it will require one fund advisor plus the Divisional Director.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Fund Advisor Name: |  |
|  |  |
| Fund Advisor Signature: |  |
|  |  |
| Date: |  |
|  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Fund Advisor Name: |  |
|  |  |
| Fund Advisor Signature: |  |
|  |  |
| Date: |  |
|  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Divisional Director Name: |  |
|  |  |
| Divisional Director Signature: |  |
|  |  |
| Date: |  |
|  |  |
|  |  |  |

Thank you for completing this form. Please return it to [esth.charity@nhs.net](mailto:esth.charity@nhs.net) and acquaint yourselves with the next steps:

* This completed Payment Request Form (SBS requisition) is to be emailed to [esth.charity@nhs.net](mailto:esth.charity@nhs.net)
* The Financial Accountant will reply to the end user approving the order should everything be confirmed as complete and approved.
* End user will raise a requisition on SBS, matching the details and costs on this payment request form. Please note: any increase in price will need further approval from the Financial Accountant.
* Lines are to be coded to RVRN.000000.1288.00000.00000.000000
* End User will attach relevant supporting documentation to the requisition including:
* Signed and completed Payment Request Form
* A quote, if applicable
* Copy of email approval from the Financial Accountant
* The requisition on SBS is to be approved by the Divisional Director or the equivalent with an appropriate approval limit.
* Please advise Financial Accountant of the requisition number.
* Procurement will check supporting documentation before creating a Purchase Order.