

PAYMENT APPROVAL FORM

KCDIOM: _____

CHECKLIST

GENERAL DOCUMENTS FOR PAYMENT

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Verified Original Invoice/Receipt
 Approved Proposal & Financial Report (if any)
 Trust Fund Minute Meeting (if any)

TYPE OF PAYMENT

(please tick accordingly)

DIRECT ADVICE

- Registered IIUM Vendor
- Appointment Letter (*for Honorarium*)
- Refreshment Order Form & Invitation Letter
- LHDN Tax Clearance Letter (*for Gratuity*)
- IIUM Clearance Form (*for Gratuity*)
- Contract Staff Appointment Letter (*for IIUM School Fees*)
- Copy of bank account (*for individual, non-IIUM staff*)
- Copy of passport (*for individual*)

REIMBURSEMENT

- Complete ITD Computer Allowance Form
- Appointment Letter (*for New Staff*)
- Certificate for IR/CEng/PEng (*KOE Only*)
- Overseas Conference Form & Lampiran A
- Air Fare to visit Home Region
- MSD approval for attending external training form
- Invitation/Email /Other Correspondence

PETTY CASH

- Petty Cash Claim Form
- Petty Cash Statement (Report)

PO PAYMENT

- Invoice
- Copy of PO
- DO/Service Report

CONTRACT/LEASING/RENTAL

- DO/Cert. of Completion/Practical Completion
- Letter of Award
- Financial Report
- Service Report - Works/Services

FACILITIES MANAGEMENT

- Verified Summary of KPI Deduction
- Details of Agreed Deduction
- Minutes Meeting

LAND MATTERS (Quit Rent, Tax Assessment, Lease, etc)

- Verified bill
- Summary of quit rent/ tax assessment (if any)
- Lease Agreement (Lease only)

UTILITIES

- Verified bill

WASTE MANAGEMENT

- Verified Report
- Copy of LOA
- Complete Consignment Note

SAVING PROJECT

- Verified report by FMS technical staff
(Energy & Water Saving)
- Copy of LOA

PAYMENT'S PARTICULAR

1) PAYABLE TO (NAME)			
2) STAFF / STUDENT MATRIC NO. (if any)		3) PHONE NO.	
4) BANK DETAILS <i>(For non-IIUM Staff (individual), please enclose a copy of bank account)</i>	Bank Name		
	Account No.		
	SWIFT / IBAN Code (if any)		

5) SOURCE OF BUDGET	Account Code (vote) <i>eg. B29404</i>		
	Project Code (if any) <i>(Operating / Trust / Student Fund)</i>		
	Budget Available (RM):		
6) PAYMENT DETAILS <i>(If space is insufficient, please use attachment)</i>	DESCRIPTION		AMOUNT (RM)
	1.		
	2.		
	3.		
	4.		
	TOTAL (RM)		

NOTES :

1. All documents for payment must be **submitted within 3 months** from the date of financial documents
(ie. invoice/receipt and etc.)
2. The supporting documents must be **verified** by the authorised administrative officer.

DECLARATION BY KCDIOM		
Prepared by Staff KCDIOM :	Verified by Authorised Administrative Officer:	Approved by Head of KCDIOM (Dean/Director):
.....
(Signature & Official Stamping)	(Signature & Official Stamping)	(Signature & Official Stamping)
Name : _____	Name : _____	Name : _____
Date : _____	Date : _____	Date : _____
Ext. No. : _____	Ext. No. : _____	Ext. No. : _____

FOR FINANCE USE	
DOCUMENT STATUS :	COMPLETE / INCOMPLETE
REMARK :	
DATE :	