

Employee EFT Payment Details Form

(Please refer to Pg 2 for instructions)

Vote:

Serial No: yymm

Tick as appropriate: New: Change: Inactivate

A-Employee Information:

Employee Name:

Tin

Employee no:

B-Bank Information:

Bank Name:.....

Branch Name:.....

Account Name:

Bank Code

Branch Code

Bank Account:

Currency: UGX

C-Authorised by (Accounting Officer)

Name

.....

Title

.....

Signature

.....

Date

.....

Email

.....

Phone no:

.....

D-Received at MoFPED by

Name

.....

Title

.....

Signature

.....

Date

.....

Email

.....

Phone no:

.....

E-Entered on the System by:

Name

.....

Title

.....

Signature

.....

Date

.....

INSTRUCTIONS FOR FILLING

1. Forms are in duplicate; Original to be returned to MoFPED and the duplicate to be kept by the site.
2. This form has to be filled by an authorised person and endorsed by the personnel officer
3. The applicable vote code is as is in the IFMS Chart of accounts
4. Request type must be indicated at all times(Change, New, Delete)
5. The employee number required is the payroll number and must be filled (if exist - indicate if not available)
6. Forms filled each month have to be serialised e.g. the first form filled in the April in shall take the form 07040001 where 04 is the month, 07 is the year and 001 is the serial number
7. No serial numbers shall be skipped
8. Bank and Branch code shall be the codes recognised by Bank of Uganda
9. Section A-B are filled by the appropriate authority at the ministries. Please note that only UGX accounts are to be provided
10. Section D and E are filled by the appropriate persons at MoFPED
11. *Change* request should fill only fields that have to be changed
12. Employee number can not be changed
13. *New* requests must fill all fields
14. *Inactivate* request may only fill the employee number and name