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**PERAKUAN PENERIMAAN BAYARAN**

|  |  |
| --- | --- |
| **BAHAGIAN A – MAKLUMAT PROJEK** | |
| Kod S/O | No Ruj | : |
| Tajuk Projek | : |

|  |  |  |
| --- | --- | --- |
| **BAHAGIAN B – MAKLUMAT PENERIMA** | | |
| Nama Penerima | : | |
| No. Kad Pengenalan | : | |
| No. Telefon | : | |
| Jumlah Bayaran Diterima | : **RM** | |
| **Tempoh Bekerja** : hari | **Tarikh Bekerja** : Mulai | hingga |
| Tujuan :  Khidmat Pembantu Penyelidik (RA) (maksimum 14 hari – RM1,400.00)  Pembanci  Lain-lain Perkhidmatan Penyelidikan (Nyatakan) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Tandatangan :  Tarikh : | | |

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| --- | --- | --- |
| **BAHAGIAN C – PENGESAHAN KETUA PENYELIDIK** | | |
|  | Saya tidak mempunyai apa-apa kepentingan peribadi secara langsung atau tidak langsung atau dipengaruhi oleh mana-mana pihak lain atau terlibat dalam apa-apa amalan rasuah atau suapan seperti ditafsirkan di bawah Akta Suruhanjaya Pencegahan Rasuah 2009 [Akta 694];  Tiada mana-mana saudara atau sekutu saya seperti ditafsirkan di bawah Akta Suruhanjaya Pencegahan Rasuah 2009 [Akta 694] mempunyai apa-apa kepentingan dalam mana-mana urusan pemberian dana, urusan perolehan atau urusan-urusan lain yang berkaitan dengan projek penyelidikan yang dikendalikan oleh saya. | |
| Dibayar oleh (Ketua Penyelidik)  Tandatangan  Tarikh | | :  :  : |

|  |  |
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| **BAHAGIAN D – SOKONGAN AHLI PENYELIDIK** | |
| Nama (Ahli Penyelidik)  Tandatangan  Tarikh | :  :  : |

Unit Pelaksanaan Operasi RMC\_RMC 013\_Borang Perakuan Penerimaan\_Pindaan 7.2.2024

**Nota:**

1. Hanya Ketua Penyelidik sahaja yang dibenarkan memohon tuntutan perbelanjaan penyelidikan.
2. Saksi adalah di kalangan ahli penyelidikan ini.
3. Sila sertakan slip/resit *e-payment* bagi bukti pembayaran.
4. Bagi pembayaran secara tunai, sila sertakan bukti bergambar.

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**PAYMENT RECEIPT DECLARATION**

|  |  |
| --- | --- |
| **SECTION A – PROJECT DETAIL** | |
| S/O Code | Ref No | : |
| Project Title | : |

|  |  |  |
| --- | --- | --- |
| **SECTION B – RECEIVER DETAIL** | | |
| Receiver Name | : | |
| Identification Card No. | : | |
| Telephone No. | : | |
| Total Payments Received | : **RM** | |
| **Working period** : *days* | **Working Date** : *Start* | *Until* |
| Purpose :  Research Assistant (Maximum 14 days – RM1,400.00)  Enumerator  Other Research Services (Please State) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Signature :  Date : | | |

|  |  |  |
| --- | --- | --- |
| **SECTION C – DECLARATION OF PROJECT LEADER** | | |
|  | Without having any personal interest or interest vested in or influenced by any other party or involved in any corrupt practice or reward as interpreted under (Akta Suruhanjaya Pencegahan Rasuah 2009 [Akta 694]);  None of my relatives or associated as interpreted under (Akta Suruhanjaya Pencegahan Rasuah 2009 [Akta 694]) has any interest in any funding, procurement or other matters related to the research project conducted by me. | |
| Paid By (Name of Project Leader)  Signature  Date | | :  :  : |

|  |  |
| --- | --- |
| **SECTION D – WITNESSED BY TEAM MEMBER** | |
| Name of co-researcher  Signature  Date | :  :  : |

Unit Pelaksanaan Operasi RMC\_RMC 013\_Borang Perakuan Penerimaan\_Pindaan 7.2.2024

**Note:**

1. Only the Principal Investigator (PI) Researcher is allowed to apply for research expense claims.
2. Witnessed by co-researcher.
3. Please include the e-payment slip/receipt for proof of payment.
4. For cash payments, please include photo proof.