

# BOXTALKS INC

Period Covered:

JULY 29-AUGUST 5, 2022

## ADMIN REIMBURSEMENT

DATE	DESCRIPTION	AMOUNT
7/29/2022	CHINO DE LEON-FOR INSPECTION OF BUSTED LIGHT IN BTB ERMITA (BTBE-072722-0020)	
	MAIN OFFICE TO CUBAO	20.00
	CUBAO TO RECTO	20.00
	RECTO TO PEDRO GIL	20.00
	PEDRO GIL TO D. JOSE	20.00
	D. JOSE TO RECTO	20.00
	RECTO TO CUBAO	20.00
		120.00 ✓
7/30/2022	CHINO DE LEON-REPAIR OF PATCH LOCK PLATE IN BTB RESORTS WORLD MANILA (BTBRW-072922-0022)	
	N-A TO TAFT	28.00
	TAFT TO T3	15.00
	T3 TO TAFT	15.00
	TAFT TO CUBAO	28.00
	CUBAO TO MAIN OFFICE	20.00
		106.00 ✓
8/1/2022	ARVIN GAVINO-4 ONLINE APPLICATION PAYMENT/ 1 MANUAL APPLICATION AT OMB	
	MAIN OFFICE TO OMB	35.20
	OMB TO MAIN OFFICE	31.20
		66.40 ✓
8/2/2022	CHINO DE LEON-INSPECTION FOR DISALIGN GLASS PANEL IN BTB BGC SERVICE CENTER (BTBBGCSC-080122-0013 TO 0014) (LIQ#080203)	
	SHAW TO GUADA	16.00
	GUADA TO MARKET	13.00
	MARKET TO BGC	13.00
	BGC TO MARKET	13.00
	MARKET TO GUADA	13.00
	CHINO DE LEON-CONVERSION OF T8 FLOURESCENT INTO LED T8 IN BTB ERMITA /REPLACEMENT OF TRACKLIGHT IN DW EDSA SHANGRILA (BTBE-073022-0026) (DWES-072722-0032) (LIQ#080204)	
	MAIN OFFICE TO CUBAO	20.00
	CUBAO TO RECTO	20.00
	RECTO TO P.GIL	20.00
	P.GIL TO RECTO	20.00
	RECTO TO CUBAO	20.00
	CUBAO TO SHAW	16.00
		68.00 ✓
		116.00 ✓

	ARVIN GAVINO-2 ONLINE APPLICATION FOR PAYMENT IN OMB		35.20 ✓
	MAIN OFFICE TO OMB	35.20	
8/3/2022	JENIFER RAPISTA-OPENING AN ACCOUNT TO AUB FOR IMPORT PERMIT PAYMENT PURPOSES (VIA <u>NSW.GOV.PH</u> ) CARD FEE		100.00 ✓
	SERVICE CHARGE FOR CARD FEE	100.00	
	ARVIN GAVINO-DROP OFF MS. JENIFER RAPISTA IN AUB TIMOG		27.20 ✓
	MAIN OFFICE TO AUB TIMOG	27.20	
8/4/2022	CHINO DE LEON-REPLACEMENT OF CEILING LIGHT IN BTB RESORTS WORLD MANILA (BTBRW-071622-0022)		78.00 ✓
	MAIN OFFICE TO CUBAO	20.00	
	CUBAO TO TAFT	28.00	
	TAFT TO T3	15.00	
	T3 TO TAFT	15.00	
8/5/2022	JONH DAVID LAGTO-DISINFECT/ULV FOGGIG IN BTB UPTOWN MALL		50.00 ✓
	OT MEAL	50.00	
TOTAL:			766.80

Prepared by: JEN RAPISTA  
ADMIN


Approved by: KAT GO  
ADMIN HEAD


Page - 6023

Shirley Wilson

BoxTails

[illegible]

Prepared by: 

Checked by: 

Signature and printed name of the  
impeached/judging date

Reviewed by:

Signature over printed name of the  
Petty Cash Custodian/ date

Signature over printed name of the Requestor/ date

Signature over printed name of:  
the Petty Cash Custodian/ doer

**Note: "Remarks" shall be filled out by the Petty Cash Custodian**

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME		DATE SUBMITTED	07/23/22
DEPARTMENT/STORE	Boys Brigade	WOR NO.	BOE - 072722 - 0020
PRIORITY LEVEL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> URGENT/HIGH <input type="checkbox"/> INTERMEDIATE/MEDIUM <input type="checkbox"/> LOW		

Please check the boxes above for the priority level indication.

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

- Bldg 40px paint
- 2as to low
- la ceiling high

To be fill up by the requestor, kindly please make the problem description clear and concise.

REQUESTEE'S NAME	Boys Brigade	DATE RECEIVED	07/23/22
DEPARTMENT	Boys	CONTRACTOR/IN-HOUSE	C - dlee

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date		Start Time	7:30am	End Time	4pm	Service Report No.	
The inspection only to be done for the replacement of bad hinge							

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

FOR PAYMENT REQUEST

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

VERIFIED BY	MARY JOCE CARINES	DATE VERIFIED	JULY 29, 2022
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To be fill up by the admin dept. and requestor..

Requestor's Name: Samir de la

Date of Requisition: 03/30/22  
Date of Liquidation: 04/29/22

# BOXTALLES

87784-032912-0632

[illegible]

Prepared by: \_\_\_\_\_  
 Required signature & date \_\_\_\_\_

Checked by: \_\_\_\_\_  
 Signature and printed name of the  
 immediate superior & date \_\_\_\_\_

Reviewed by:

Signature over printed name of the  
Petty Cash Custodian/ date

Signature over printed name of the Requestor/ date

Signature over printed name of  
the Petty Cash Custodian/ date

**Note: "Remarks" shall be filled out by the Petty Cash Custodian**

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME	DATE SUBMITTED
DEPARTMENT/STORE	WOR NO.
PRIORITY LEVEL	EMERGENCY <input type="checkbox"/> URGENT/HIGH <input checked="" type="checkbox"/> INTERMEDIATE/MEDIUM <input type="checkbox"/> LOW <input type="checkbox"/>

Please check the boxes above for the priority level indication

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

diamond patch hole plate

To be fill up by the requestor, kindly please make the problem description clear and concise.

REQUESTEE'S NAME	DATE RECEIVED
DEPARTMENT	CONTRACTOR/IN-HOUSE

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date	Start Time	End Time	Service Report No.
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fixing of patch hole plate using  
and repair of plate & bolt again

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

DONE!!

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

VERIFIED BY	DATE VERIFIED
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To be fill up by the admin dept. and requestor..

**Notice: "Remarks" shall be filled out by the Petty Cash Custodian**



**Nº 3881967 E**

Date August 1, 2022

Agency	Fund
...	...

Payor	BOXTALKS, INC.
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Nature of Collection	Account Code	Amount
Import Permit	605	P 500.00
Certificate	619	P 37.00
TOTAL		P 537.00

Amount in Words Five Hundred Fifty Three Cents

<input type="checkbox"/> Cash	Drawee Bank	Number	Date
<input type="checkbox"/> Check			
<input type="checkbox"/> Money Order			

Received the amount stated above.

1. Plants  
 2. Animals  
 3. People  
 4. Other

Collecting Officer

NOTE: Write the number and date of this receipt on the back of check or money order received.



the President of the Philippines

**CAL MEDIA BOARD**

aga Street Bgy. Laging Handa, Quezon City  
93 \* Fax No. 374-0237 \* [www.omb.gov.ph](http://www.omb.gov.ph)

**ATTENTION \*Required Entries / Selection**

## ON FOR IMPORT PERMIT

<b>SOURCE NAME</b>		<b>CONTACT NO.</b> 86543561	
<b>KS INC</b>			
<b>ESS ADDRESS</b>			
D THE BOX-BGC LOWER GROUND FLOOR C3 BONIFACIO HIGH 28TH ST. TAGUIG CITY Metro Manila			
<b>AGENT/REPRESENTATIVE</b>		<b>*POSITION</b>	
<b>ES PAW</b>		<b>OWNER</b>	
<b>VNG COMPANY / FORWARDER</b>		<b>*CONTACT NO.</b> 717-6765	
<b>ESS ADDRESS</b>		<b>*POINT OF ORIGIN</b>	
Units 3&4 Oyster Industrial Complex e, Paranaque City		China	
<b>SOURCE OF RIGHTS</b>	<b>*BUSINESS NAME</b> BOXTALKS INC		
	<b>*BUSINESS ADDRESS</b> BEYOND THE BOX-BGC LOWER GROUND FLOOR C3 BONIFACIO HIGH STREET, 28TH ST. TAGUIG CITY Metro Manila		
<b>FORMATION</b>			
<b>Del</b>	<b>Serial No.</b>	<b>Quantity</b>	<b>SID</b>
(ds, etc.)			
<b>ion</b>	<b>Manufacturer</b>	<b>Mold or Stamper or SID or LBR No.</b>	
GOLD-JTP1 APPLE		FFLHX0C4Q1GJ	

2. that the copy of AWB/BI, as submitted is true and correct; and  
3. that it is clearly understood that failure and/or refusal to comply with this undertaking by me and/or my representative/s shall be a ground for revocation of my license;  
4. I hereby certify to the correctness of the information given in connection with this application, under pain of perjury.

described above, given in connection with the application under pain of perjury.

1964 CIV 116-01-101

01 2022

CHARLES PAW

CHARLES FAW  
PRINTED NAME & SIGNATURE OF APPLICANT



OMB0730225730594

DOC, 190

PAGE TWO

B0002352

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971).

ATTY. RYAN M. WHITE  
 NOTARY PUBLIC QUEZON CITY  
 PTR No. 256-027; 04/27/2022; Q.C.  
 IBP No. 176366; 02/15/2022;  
 Roll No. 72132  
 MCLE Compliance No. VI-0030668  
 Adm. No. NP-071(2021-2022)  
 UNTIL DECEMBER 31, 2022



On the 4th


Date of Requisition: 07-02-20  
Date of Liquidation: 07-02-20

Date of Requisition: 07-02-20  
Date of Liquidation: 07-02-20

# BOXTAPLES

DTB Inc. SC - 080122 - D 613  
DTB Inc. SC - 080122 - D 614

[illegible]

Checked by:   
Signature over printed name of the  
Immediate Supervisor/Officer

Reviewed by: \_\_\_\_\_  
Signature over printed name of the  
Petty Cash Custodian/ date

Signature over printed name of the  
Requestor/date

Signature over printed name of the Petty Cash Custodian/ date

Note: "Remarks" shall be filled out by the Petty Cash Custodian

LIN# 080207

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME DEPARTMENT/STORE	DATE SUBMITTED WOR NO.
EDS BCL	08-02-22 08012-0012
PRIORITY LEVEL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> URGENT/HIGH <input type="checkbox"/> INTERMEDIATE/MEDIUM <input type="checkbox"/> LOW

Please check the boxes above for the priority level indication.

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

- request for back job for of mobile glass window

To be fill up by the requestor, kindly please make the problem description clear and concise.

REQUESTEE'S NAME DEPARTMENT	DATE RECEIVED
Bon Bon BCL	08-02-22 E. Allan

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date	Start Time	End Time	Service Report No.
08-02-22	08:00	09:00	

- need to adjust the glass panel to be properly and seal every glass panel

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	TOTAL

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

base job for contractor and 3rd fed committed to daylight

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

VERIFIED BY	DATE VERIFIED
PENIE [Signature]	08-02-2022

To be fill up by the admin dept. and requestor..

# PETTY CASH LIQUIDATION REPORT

Requestor's Name:

Chad Brown

Date of Requisition: 08-02-72

Date of liquidation: 1/1/2010

# NOTES

[illegible]

Prepared by  
Requestor's Signature/Date

Checked by:

Signature over immediate head of the immediate Superior/donor

Reviewed by:

Signature over printed name of the  
Petty Cash Custodian/ date

Received by:

Applicable if the liquidation resulted to "Advances from" employee:

Received by:

Applicable if the liquidation resulted to "Advances to" employee:

Signature over printed name of the

Requestor/ date

Signature over printed name of the Petty Cash Custodian/ date

Note: "Remarks" shall be filled out by the Petty Cash Custodian

LIR# 080204

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME	DATE SUBMITTED			
DEPARTMENT/STORE	WOR NO.			
PRIORITY LEVEL	EMERGENCY	URGENT/HIGH	INTERMEDIATE/MEDIUM	LOW

Please check the boxes above for the priority level indication

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

- Bed # of chicken

To be fill up by the requestor, kindly please make the problem description clear and concise.

REQUESTEE'S NAME	DATE RECEIVED
DEPARTMENT	CONTRACTOR/IN-HOUSE

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date	Start Time	End Time	Service Report No.
Replacement of T8 converted to led lighting			

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

DONE

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

VERIFIED BY

DATE VERIFIED

To be fill up by the admin dept. and requestor.

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME	DEPARTMENT/STORE	DATE SUBMITTED	WOR NO.
	De. Chae (DW EDSA SHAWOLING)	07/02/22	DWRS - 070222 - 0072
PRIORITY LEVEL	<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> URGENT/HIGH	<input type="checkbox"/> INTERMEDIATE/MEDIUM
	<input type="checkbox"/> LOW		

Please check the boxes above for the priority level indication.

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

Behd. road light

To be fill up by the requestor, kindly please make the problem description clear and concise.

REQUESTEE'S NAME	DATE RECEIVED
Berna Bando	07.02.22
DEPARTMENT	CONTRACTOR/IN-HOUSE
Admin	C. dillon

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date	Start Time	End Time	Service Report No.
	1:30	2 pm	
Requirement of road light			

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

DONE

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

VERIFIED BY

JOSUAGAN

DATE VERIFIED

08/02/22

To be fill up by the admin dept. and requestor..

Art's Down

# PETTY CASH LIQUIDATION REPORT

Date of Requisition: 08-02-22

Date of liquidation:

[illegible]

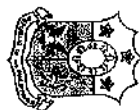
Applicable if the liquidation resulted to "Advances from" employee:

**Applicable if the liquidation resulted to "Advances to" employee:**

Signature over printed name of the Requestor/date

Signature over printed name of the Party  
Cash Custodian/ date

Note: "Remarks" shall be filled out by the Petty Cash Custodian



**Official Receipt  
of the  
Republic of the Philippines**

**No. 3881995 E**

Date **August 2, 2022**

Agency **OFFICIAL MEDIA BOARD** Fund

Payer **SORTALING INC.**

Nature of Collection	Account Code	Amount
IMPORT PERMIT	603	P 300.00
LEGAL FEE	613	50.00
<b>TOTAL</b>		<b>P 350.00</b>

Amount in Words **Three Hundred Fifty Pesos Only**

<input type="checkbox"/> Cash	Drawee Bank	Number	Date
<input type="checkbox"/> Check			
<input type="checkbox"/> Money Order			

Received the amount stated above.

*M. Martin*

Collecting Officer

NOTE: Write the number and date of this receipt on the back of check or money order received.

Martin de  
1109

San Martin  
Manila, 1109

Shipment Documents Assessment Reg. & Lic.

ASST-0822-000057 - Updated

Select Payment Method

Select Payment Method

Fee Type Amount

REGISTRY

Permit 500

LEGAL

Clearance 50

Total Amount 550

**3881995**



**Official Receipt  
of the  
Republic of the Philippines**

**Nº 3881996 E**

Date February 22, 2017

Agency \_\_\_\_\_

## Fund

Payor

2010年12月10日

Nature of Collection	Account Code	Amount
TIMBER DEPOSIT	606	P 580.00
LITERATURE	613	300.00
TOTAL		P 880.00

Amount in Words

1. *Chrysomelidae* (Coleoptera)

<input type="checkbox"/> Cash	Drawee	Number	Date
<input type="checkbox"/> Check	Bank		
<input type="checkbox"/> Money Order			

Received the amount stated above.

**Figure 1**

## Collecting Officer

**NOTE:** Write the number and date of this receipt on the back of check or money order received.

Reg. &amp; Lic.

ASST-0822-000056 - Updated

Select Payment Method

### Select Pageant: Method

Fee Type	Amount
Application Fee	\$100.00
Registration Fee	\$150.00
Exam Fee	\$200.00
Materials Fee	\$50.00
Travel Fee	\$300.00
Accommodation Fee	\$250.00
Meals Fee	\$100.00
Transportation Fee	\$75.00
Insurance Fee	\$25.00
Security Fee	\$10.00
Administrative Fee	\$5.00
Other Fee	\$0.00
<b>Total Fee</b>	<b>\$1,435.00</b>

## REGISTRY

Permit 500

LEGAL

Clearance	50
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Total Amount	550	<del>550</del>	88199	5
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Note: "Remarks" shall be filled out by the Petty Cash Custodian

This serves as an OFFICIAL RECEIPT when validated.

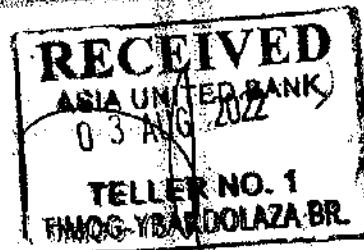


# Transaction Slip

219385 080 08/03/2022 10:50:42 18 Q# 0803-0009  
MHC: PHP 100.00 J CSH: PHP 100.00

Service Charges - Starter Savings ATM Card

This serves as an OFFICIAL RECEIPT when validated.



Subject to the terms and conditions covering this account/transaction, this serves as your official receipt when machine validated. (see reverse side for withdrawal details).

BBC-00139-00

**AUB** Starter

6029 1408 0990 0267

08/28

JENIFER A RAPISTA

David Davino

Date of Requisition: 08-03-22

Date of Liquidation:

[illegible]

Checked by \_\_\_\_\_

Reviewed by:

Signature over printed name of the

immediate superior/ date

**Signature over printed name of the**

Requestor's date

Signature over printed name of the Petty Cash Custodian/ date

the Petty Cash Custodian/ date

Note: <sup>11</sup>Remarks\* shall be filled out by the Petty Cash Custodian



KINDLY FILL OUT NEEDED INFO FOR CONTACT TRACING PURPOSES:			
DATE:	8/9/2022		
TIME:	9:40am	9:40am	TEMP: 96.00
NAME	Jenifer Rapista		
CONTACT NO	09269124650		
COMPANY NAME OR ADDRESS	Digits trading Corp.		
(FOR AUB STAFF TO FILL-OUT)			
BRANCH NAME: IMOG YBARDO LAZA			
AUB STAFF NAME:			
TIME TRANSACTION ENDED:			

BTBR - 02122 - 0022

Chairs de bois

## BOX TALKS

[illegible]

Prepared by: Shreyas Bhat

Requestor's Signature/ date \_\_\_\_\_

Signature over printed name of the Immediate Superior/ date

Reviewed by:

Signature over printed name of the  
Petty Cash Custodian/ date

Applicable if the liquidation resulted to "Advances from" employee:

Applicable if the liquidation resulted to "Advances to" employee:

Signature over printed name of the Requestor/ date

Signature over printed name of  
the Petty Cash Custodian/ date

Note: "Remarks" shall be filled out by the Petty Cash Custodian

L1B#080402

# DIGITS TRADING INC.

#56 Mayor Ignacio S. Diaz St., Brgy. San Martin De  
Pores, Quezon City

## WORK ORDER REQUEST FORM

REQUESTOR'S NAME  
DEPARTMENT/STORE

Daniel RWH

DATE SUBMITTED  
WOR NO.

09/16/22

BTDRN - 071622 - 0023

PRIORITY LEVEL

☐

EMERGENCY

☐

URGENT/HIGH

☐

INTERMEDIATE/MEDIUM

☐

LOW

Please check the boxes above for the priority level indication.

## WORK REQUEST/PROBLEM COMPLETE DESCRIPTION

- Bldg Ceiling Lights

REQUESTEE'S NAME  
DEPARTMENT

Don Benito  
RWH

DATE RECEIVED

09/09/22

CONTRACTOR/IN-HOUSE

C. Dula

To be fill up by the requestor, kindly please make the problem description clear and concise.

To be fill up by the requestee (usually for admin dept. personnel).

## WORK/ACTIVITIES PERFORMED

Date

Start Time

1:30

End Time

3:00

Service Report No.

- replacement of the ceiling lights

## MATERIALS/PARTS USED

QTY	UNIT	MATERIALS/PARTS DESCRIPTION	OR NO.	SI NO.	TIN NO.	UNIT PRICE	AMOUNT

To be fill up by the maintenance in-house or admin dept. base on the service report submitted by the contractor.

## ADDITIONAL INSTRUCTIONS

VERIFIED BY

Murphy Santiago

DATE VERIFIED

09/14/22

To be fill up by the admin dept. and requestor..

DONE



## Requestor's Name:

JOHN DAVID LOGAN

Date of Requisition:

Date of Liquidation:

# POXTAILS

[illegible]

Requestor's Signature/ date

Checked by:

Signature over printed name of the  
Immediate Superior/ date

Reviewed by:

Signature over printed name of the  
Petty Cash Custodian/ date

Signature over printed name of the Requestor/ date

Signature over printed name of  
the Petty Cash Custodian/ date

**Received by:**  
**employee:**  
**resulted to "Advances from"**  
**Applicable if the liquidation**

**Applicable if the liquidation resulted to "Advances to" employee:**

Note: "Remarks" shall be filled out by the Petty Cash Custodian

L112#080503

# DIGITS

TECHNICAL SERVICE

56 Mayor Ignacio Diaz St., San Martin De Porres, QC

Tel. No: 8654-3561 CP No: 09178696980

GUARD IN 2310H BY APOLINARIO

GUARD OUT 2115H

Date 8-4-22

Time In

Out

☒ Regular ☐ Time ☐ Main Office ☐ Restaurant ☐ Retail ☐ Commissary

Client

UPTOWN BSB / BEYOND THE BOX

Location

UPTOWN MAIL

## Services Performed

## Target Pest (s)

## Application Method

☐ Inspection

Crawling Insect

ULV Cold Fogging

☒ Treatment

Flying Insect

☐

Rodents & Bacteria

## Chemicals

## Water

## Amount

## Machine Amount

SANICPRAY

1.5 L

17.00

Unit Cost per Square Area

Location Square Area

Total Amount Due (Php)

## Work Description

## Manpower

## Time Duration

Mixing of water & snucop powder

PHILMAN

30 mins

ULV Fogging Disinfection

DIGIT'S TRADING

Remarks

Ref. No.

Served by

JOHN DAVID LAGAN

Client's Printed Name & Signature

KARL CABRERA