	PAYN	IENT REQUEST FORM
Date:	1-25-2023	Document No.: AFD20161017-001 v.1
Payee:	REY DAN ORMITA	Date Needed: 1/20/1/15/2023
Amount:	15,000.00	
Branch Name:		
Department:	Marketing Department	•
Purpose:	CONSULTATION FEE-FEBRUARY	•
Remarks:	CONSULTATION FEE-Graphic Artist	
 	BDO	<u> </u>
REQUESTED BY:	Convillation Mekaela Consular (Requestor) Makagad Macel Abeiero	
APPROVED BY:	Macel Abelero AVP for Marketing - MCG	·
Í		3 working days upon received of original Payment Request Form. y proof that can support your request. This form will be used tract & Permits payments.
FOR ACCOUNTING ONLY		
Accounting Dept:		Finance Dept:
Received by:	Processed by:	Verified By: Approved by:
Name/ Date	Name/ Date	Name/ Date Name/ Date
Requestor Copy		