



PAYMENT REQUEST FORM

Date: (09/21/22)

Document No.: AFD20161017-001 v.1

Payee: Micah Ella Rivera

Date Needed: September 30, 2022

Amount: P15000

Branch Name: _____

Department: MCG Department

Purpose: Event Day Media Honorarium

Remarks:

Banco de Oro

Account No. - 006580152205

REQUESTED BY: Micah Ella Rivera
(Requestor)

APPROVED BY: Macel Abejero
(Immediate Head)

*Note*Accounting process in payables is 3 working days upon received of original Payment Request Form.
Pls. attached approved quotation or any proof that can support your request. This form will be used
for NON P.O Item such ask base on contract & Permits payments.*

FOR ACCOUNTING ONLY

Accounting Dept:

Received by:

Name/ Date

Requestor Copy

Processed by:

Name/ Date

Finance Dept:

Verified By:

Name/ Date

Approved by:

Name/ Date