	P/	AYMENT REQI	JEST FORM			
Date Requested:	27-Jan-23		Date Needed:	ASAP		
Mode of Payment:	Cash	Cash X Online		If the request is above Php	If the request is above Php 1,000.00, cheque will be release	
Payee: _	Bureau of Intern	Bureau of Internal Revenue		ent: Accounting	Accounting	
Amount:	₽	1,123,745.11		/pe: TAXES EXPENSE	S	
Purpose:	Payment for 255	OM of BOXTALKS IN	C. for the month of N	ovember 2022		
Remarks:						
BANK ACCOUNT DET	TIN IDs and 1val	nt (signed by execut id Gov't ID to i.g SSS t for the applicable i FORM	month.	, DRIVERS LINCENSE (for no Bank: SECURITY BANK COR Account Name: BOXTALKS Account Number: 0000-00!	P.	
Account Number: _						
REQUESTED BY: _	Maureen Mae Li Name Over Signa		APPROVED BY:  For incomplete  APPROVED BY:	(Immediate He		
Note: Accounting Payables Process is 3 Please attach approved quotation(s) or			•			
		FOR ACC	DUNTING ONLY			
Accounting Dept: Processed by:	Processed by	Finance Dept:  Processed by:  Verified By:  Approve				
Name Over Signature/ Date	Name Over S	gnature/ Date	Name Over S	Name/ Date		