	PAYMENT F	REQUEST FORM	
Date:	28-Sep-22	Document No.: AFD20161017-001 v.1	
Payee:	Jomark Tamboong	Date Needed:	3-Oct-22
Amount:	2,500.00	•	
Name:	Jomark Tamboong		
Department:	AFTER SALES (RMA)		
Purpose:	HAULING PAYMENT		
Remarks:			
	HAULING FEE WASTE DISPOSAL Non ELE	CTRONICS THROUGH	
	Construction Debris Lucky J Hauling		
	160/		
	<u> </u>		
REQUESTED BY:	Joma (// Tamboong		
	(Requestor)		
APPROVEB BY:	Ana Dorothy C. Lacorte		
	(Immediate Head)		
	Note*Accounting process in payables is 3 wor	king days upon received of original Paymer	nt Request Form.
	Pls. attached approved quotation or any proo		vill be used
	for NON P.O Item such as based on contract		
	FOR ACCO	UNTING ONLY	
Accounting Dept:		Finance Dept:	
Received by:	Processed by:	Verified By:	Approved by:
Name/ Date	Name/ Date	Name/ Date	Name/ Date
Requestor Copy			