

PAYMENT REQUEST FORM

Date Requested: 06-Jan-23
 Requestor's Name: JENIFER RAPISTA
 Company: BOXTALKS inc.
 Department/Branch: IMPORTATION DEPT
 Amount: 30,600.00

Date Needed 16-Jan-23
 Start: _____
 End: _____

Note: Maximum allowable Date needed is 15 working days from date of request, liquidation is on or before 5 working days after completion of purpose.

Detailed Purpose: Renewal for OMB IMPORTER FOR BOXTALKS INC AND SERVICE CENTER BRANCHES FEB - APRIL 2023

Attachment (please specify): Approval screenshot, Previous permit

REQUESTED BY: JENIFER RAPISTA
 Requestor's print name & signature

☐ CASH ☒ DEPOSIT

BANK ACCOUNT DETAILS FOR DIRECT DEPOSIT

Bank/Branch: BDO
 Account Name: JENIFER RAPISTA
 Account Number: 006580144946

APPROVED BY: _____
 Immediate Head print name & signature

Executive (if applicable) _____

Note: Accounting Department process payables is 3 working days upon received of original Payment Request Form. Please attached approved quotation or any proof that can support your request. This form will be used for NON P.O item such as contract & permits, meal allowance, transportation and etc.

FOR ACCOUNTING USE ONLY

Accounting Dept:	Finance Department		
Received by: _____ Print name & signature	Processed by: _____ Print name & signature	Verified by: _____ Print name & signature	Approved by: _____ Print name & signature

KIND OF PERMIT	Store	Expiry Date	Permit NO	PERMIT FEE
OMB	BOXTALKS INC.	February 10, 2023	ISD 22-01317	10,200.00
OMB	BTB VMALL SERVICE CENTER	March 2, 2023	ISD-22-021110	10,200.00
OMB	BTB BGC SERVICE CENTER	April 4, 2023	ISD-22-03576	10,200.00
TOTAL:				<u>30,600.00</u>