



PAYMENT REQUEST FORM

Date: 11-25-2022

Document No.: AFD20161017-001 v.1

Payee: Rebecca Ramores

Date Needed: 12-15-2022

Amount: 15,000

Branch Name:

Department: Marketing Department

Purpose: Consultation Fee-DECEMBER

Remarks: CONSULTATION FEE-accounts

0067 9017 1796

BDO

REQUESTED BY:

Consular
Mekaela Consular

(Requestor)

APPROVED BY:

Marketing
Macel Abejero

AVP for Marketing - MCG

*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