	PAYME	NT REQUEST FORM
Date:	12-20-22	Document No.: AFD20161017-001 v.1
Payee: Amount: Branch Name:	Jayson Paul Remo Gutierrez	Date Needed: <u>1/</u> L ₀ /1/15/2023
Department: Purpose:	Marketing Department CONSULTATION FEE-JANUARY	
Remarks:	CONSULTATION FEE-Graphic Artist 006090309663	
_	BDO	
REQUESTED BY:	ใชญปัยใ <u>Mekaela Consular</u> (Requestor)	
APPROVED BY:	Macel Abeiero AVP for Marketing - MCG	
		working days upon received of original Payment Request Form. roof that can support your request. This form will be used ct & Permits payments.
FOR ACCOUNTING ONLY		
Accounting Dept: Received by:	Processed by:	Finance Dept: Verified By: Approved by:
Name/ Date Requestor Copy	Name/ Date	Name/ Date Name/ Date