

PAYMENT REQUEST FORM

Date Requested: February 10, 2023

Date Needed: February 16, 2023

Mode of Payment: Cash

Check

If the request is above P1p 1,000.00, cheque will be released.

Payee: Lyra Joy Rara

Department: Human Resources

Amount: P 16,000.00

Expense Type: _____

Purpose: Star of the Night and Shot to Stardom Cash Prize

Remarks: _____

Attachment (If applicable):

- ____ Signed Agreement (signed by executives and consultant)
- ____ TIN IDs and Valid Gov't ID to (e.g. SS, PAG-IBIG, PASSPORT, DRIVERS LICENSE (for new consultants)
- ____ Billing statement for the applicable month.
- ____ COR / BIR 2303 FORM
- ____ Receipts/Notarial Copies

BANK ACCOUNT DETAILS FOR DIRECT DEPOSIT

Bank: BDO

Branch: Wilson Branch

Account Number: 005580140193

REQUESTED BY:

LYRA JOY RARA

Name Over Signature/ Date

APPROVED BY:

ATTY. JAYCEE L. MASEN
(Immediate Head)

For incomplete attachment

APPROVED BY:

EXECUTIVE OFFICER:

*Note: Accounting Payables Process is 3 working days upon receipt of original Payment Request Form & complete supporting documents.
Please attach approved quotation(s) or any proof to support your request. This form will only be used for NON P.O Item(s) such as contracts & permits payments.*

FOR ACCOUNTING ONLY

Processed by:	Processed by:	Verified By:	Approved by:
Name Over Signature/ Date	Name Over Signature/ Date	Name Over Signature/ Date	Name Over Signature/ Date

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