PAYMENT REQUEST FORM				
Date Requested:	: 10-Mar-23		Date Needed:	ASAP
Mode of Payment:	:Cash	Х	Check	If the request is above Php 1,000.00, cheque will be released.
Payee:	Candari, Kenneth Bernas	_	Department	: ormation Systems Developme
Amount:	8,545.04	<u> </u>	Expense Type	: SALARIES AND WAGES
Purpose:	: Last Pay			
Remarks:	: Last Pay_CANDARI			
DANK ACCOUNT	Signed Agreement (signed by executiv TIN IDs and 1valid Gov't ID to i.g SSS, P Billing statement for the applicable mo COR / BIR 2303 FORM	PAG-IE	·	RS LINCENSE (for new consultants)
	DETAILS FOR DIRECT DEPOSIT			
	·			
Account Number:		_		
REQUESTED BY:	ROSANNA BOBNEL Name Over Signature/ Date	_	APPROVED BY:	EUNECE PINEDA (Immediate Head)
			For incomplete at	tachedment
			APPROVED BY:	ATTY. JAENICEN LAMSEN Legal and Operation Heads
	3 working days upon receipt of original Payment R or any proof to support your request. This form will	•		porting documents.
	FOR ACCO	UNT	ING ONLY	
Accounting Dept: Processed by:	Processed by:	1	Finance Verified By:	Dept: Approved by:
Name Over Signature/ Date	Name Over Signature/ Date	-	Name Over Sign	
	and the eigenstancy button			Document No.: AFD20161017-001 v.3