

# REPRESENTATION REQUEST FORM

☐ CASH ASSISTANCE    ☐ ACCOMMODATION    ☐ TRANSPORTATION    ☐ REGISTRATION FEE    ☐ MEALS    ☐ OTHERS

SALES DEPARTMENT

<b>EMPLOYEE NAME</b>		<b>DATE NEEDED</b>			
<b>DEPARTMENT</b>		<b>POSITION</b>			
<b>ACCOUNT NAME</b>		<b>DISTRICT/ AREA</b>			
<b>ACTIVITY</b>		<b>NO PER PAX</b>		<b>COST PER PAX</b>	
<b>DESCRIPTION</b>		<b>QTY</b>	<b>UNIT</b>	<b>UNIT COST</b>	<b>TOTAL AMOUNT</b>
				<b>GRAND TOTAL</b>	
<b>FINANCIAL INFORMATION</b>		<b>SALES INFORMATION</b>			
TOTAL EXPENSES: _____ CASH ADVANCES: _____ DUE TO: _____ CHARGE TO: <input type="checkbox"/> SALES <input type="checkbox"/> MARKETING REMARKS: _____ <input type="checkbox"/> Debit <input type="checkbox"/> Check <input type="checkbox"/> Cash          _____		TOTAL SALES ( <i>Current Year</i> ): PHP _____ REMARKS: _____ TOTAL SALES ( <i>Last Year</i> ): PHP _____ REMARKS: _____		ARE THE EXISTING MACHINES INSTALLED? <input type="checkbox"/> RTV <input type="checkbox"/> PURCHASED <input type="checkbox"/> FUTURE PROJECT <input type="checkbox"/> NONE NAME OF MACHINE/S: _____ REMARKS: _____	
<b>PREPARED BY</b>		<b>ENDORSED BY</b>		<b>APPROVED BY</b>	
Employee's Signature <small>(Signature over Printed Name)</small>		STEPHEN C. HERNANDEZ National Sales Director  DATE SIGNED:		President / Vice-President /Chief of Operating Officers  DATE SIGNED:	

BMI-FORM-SLS-002

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DEPARTMENT		POSITION			
ACCOUNT NAME		DISTRICT/ AREA			
ACTIVITY		NO PER PAX		COST PER PAX	
DESCRIPTION		QTY	UNIT	UNIT COST	TOTAL AMOUNT
GRAND TOTAL					
FINANCIAL INFORMATION		SALES INFORMATION			
TOTAL EXPENSES: _____		TOTAL SALES (Current Year): PHP _____		ARE THE EXISTING MACHINES INSTALLED?	
CASH ADVANCES: _____		REMARKS: _____		<input type="checkbox"/> RTV <input type="checkbox"/> PURCHASED <input type="checkbox"/> FUTURE PROJECT <input type="checkbox"/> NONE	
DUE TO: _____		TOTAL SALES (Last Year): PHP _____		NAME OF MACHINE/S: _____	
CHARGE TO: <input type="checkbox"/> SALES <input type="checkbox"/> MARKETING		REMARKS: _____		REMARKS: _____	
REMARKS: _____					
<input type="checkbox"/> Debit <input type="checkbox"/> Check <input type="checkbox"/> Cash					
PREPARED BY		ENDORSED BY		APPROVED BY	
<div>Employee's Signature</div> <div>(Signature over Printed Name)</div>		<div>STEPHEN C. HERNANDEZ</div> <div>National Sales Director</div> <div>DATE SIGNED: _____</div>		<div>President / Vice-President /Chief of Operating Officers</div> <div>DATE SIGNED: _____</div>	

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