

REPRESENTATION REQUEST FORM

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

SALES DEPARTMENT

EMPLOYEE NAME:		DATE NEEDED:	
DEPARTMENT:		POSITION:	
ACCOUNT NAME:		DISTRICT/ AREA:	
ACTIVITY:		NO PER PAX:	COST PER PAX:
DESCRIPTION		TOTAL AMOUNT	
		GRAND TOTAL:	
FINANCIAL INFORMATION	SALES INFORMATION:		
TOTAL EXPENSES: _____ CASH ADVANCES: _____ DUE TO: _____ REMARKS: _____ <input type="radio"/> Debit <input type="radio"/> Check <input type="radio"/> Cash	TOTAL SALES (Current Year): PHP _____ REMARKS: _____ TOTAL SALES (Last Year): 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: _____	
REQUESTED BY:	ENDORSED BY: <input type="radio"/> APPROVED <input type="radio"/> DISAPPROVED	APPROVED BY: <input type="radio"/> APPROVED <input type="radio"/> DISAPPROVED	
Employee Signature <small>(Signature over Printed Name)</small>	SHEERE ANN BARNES National Sales Director DATE SIGNED:	Executive Committee Member DATE SIGNED:	

BMI-FORM-SLS-002

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DESCRIPTION		TOTAL AMOUNT	
GRAND TOTAL:			
FINANCIAL INFORMATION		SALES INFORMATION:	
TOTAL EXPENSES: _____	TOTAL SALES (<i>Current Year</i>): PHP _____	Are the existing machines installed? <input type="checkbox"/> RTV <input type="checkbox"/> PURCHASED <input type="checkbox"/> FUTURE PROJECT <input type="checkbox"/> NONE	
CASH ADVANCES: _____	REMARKS: _____	Name of machine's: _____	
DUE TO: _____	TOTAL SALES (<i>Last Year</i>): PHP _____	Remarks: _____	
REMARKS: _____	REMARKS: _____		
<input type="radio"/> Debit _____ <input type="radio"/> Check _____ <input type="radio"/> Cash _____			
REQUESTED BY:	ENDORSED BY: <input type="radio"/> APPROVED <input type="radio"/> DISAPPROVED	APPROVED BY: <input type="radio"/> APPROVED <input type="radio"/> DISAPPROVED	
Employee Signature <i>(Signature over Printed Name)</i>	SHEERE ANN BARNES National Sales Director DATE SIGNED:	Executive Committee Member DATE SIGNED:	

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