



Department of Education
Baguio City High School
PARENT-TEACHER ASSOCIATION, INC.

#learnerswelfareisparamount

Participatory
Transparency
Accountability
Integrity

ACKNOWLEDGEMENT RECEIPT

DATE: _____

Received the amount of _____ (Php _____)
[] cash [] check _____ (check # & Bank Details)
for _____.

Received by: _____ Date: _____
Signature Over Printed Name

Client Copy



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