

MITSUKOSHI MOTORS PHILIPPINES, INC.		
POLICY AND PROCEDURE		
POLICY TITLE :	CASH ADVANCE	Ref. No.
DEPARTMENT :	HUMAN RESOURCES DEPARTMENT	HRD-16-03-1201
TO :	ALL EMPLOYEE	

**OBJECTIVE:**

1. To provide financial assistance to regular employees for emergency purpose.
2. To provide guidelines on how to apply and process emergency Loan.

**POLICIES:**

**1. Terms and Conditions:**

- 1.1 Emergency Loan is entitled to REGULAR EMPLOYEES only.
- 1.2 Maximum Amount of Three Thousand (3,000) subject for a minimum deduction of Five Hundred Pesos (P500.00) per cut off.
- 1.3 Loans must be duly noted by Immediate Head.
- 1.4 In the event of separation of employee (resignation, termination, AWOL), One time deduction of outstanding balance of loan(s) will be deducted automatically to the employee's last pay/quitclaims.

**2. Exclusions (Not Covered by this Benefit)**

- 2.1 Matrimonial/Baptismal
- 2.2 Maternity (covered by SSS Benefits)
- 2.3 Tuition Fees
- 2.4 Renewal of Drivers License
- 2.5 Others (Special Occasions/Celebrations)

**PROCEDURE:**

**1. Employee**

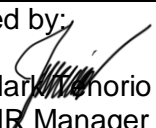
- 1.1 Fill out Cash Advance Form indicate reason for applying for Personal Loan
- 1.2 Seek approval of Branch Manager.
- 1.3 Submit approved Application form to HR Payroll c/o Ms. Romelyn Paez
- 1.4 Approved loan will be credited to the employee's payroll.

**2. Branch Manager**

- 2.1 Review completeness of Cash Advance Form and reason for loan
- 2.2 Approve Cash Advance Form and endorse for approval of Area Manager.

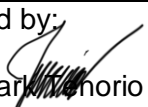

**3. Area Manager**

- 3.1 Review endorsed Cash Advance Form.
- 3.2 Ensure reasonable amount to approve and affix signature on the approval portion.
- 3.3 Return Cash Advance Form to the requesting branch.


Prepared by:  Mark L. Amorio HR Manager	Approved by:  Richmond Ngan Executive Officer	Effective  March 12, 2016	Page 1 of 3
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4. **Form Explanation:** follow the standard format in filling out Cash Advance Form for Emergency Loan Purpose.

<u>PARTICULAR</u>	<u>EXPLANATION</u>
4.1 Company	: Indicate current company of the employee
4.2 Branch/Department	: Employee's assigned Branch/Department
4.3 Position Title	: Employee's current position
4.4 Date Filed	: Actual date of Filing
4.5 Date Hired	: Actual Hiring Date from Trainee Period
4.6 Purpose of Cash Advance	: The box that corresponds to your request (Accident Financial Assistance, Calamity Loan, Personal Loan, Bereavement Assistance)
4.7 Reason for Request	: Discuss briefly the reason for request
4.8 Authorization	: Indicate the name of company and amount in words and figures to be deducted based on the corresponding type of Cash Advance.
4.9 Requested by	: Affix requesting employee's Signature over Printed Name.
4.10 Noted by:	: Branch Manager's Signature over Printed Name upon review and approval
4.11 Approved by:	: Area Manager's Signature over Printed Name upon review and approval.

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## ANNEX A

 <b>CASH ADVANCE FORM</b>			
COMPANY:		BRANCH/DEPARTMENT	
NAME:		DATE FILED:	
POSITION TITLE:		DATE HIRED:	
<b>PURPOSE OF CASH ADVANCE</b> <small>(Please check the purpose of your cash advance)</small>			
<input type="checkbox"/> ACCIDENT FINANCIAL ASSISTANCE <input type="checkbox"/> CALAMITY LOAN <input type="checkbox"/> EMERGENCY LOAN <input type="checkbox"/> BEREAVEMENT ASSISTANCE <input type="checkbox"/> OTHERS			
DISCUSS BRIEFLY YOUR REASON FOR THIS REQUEST:			
<b>AUTHORIZATION</b> <small>(Except for Accident Financial Assistance and Bereavement Assistance)</small>			
I hereby authorize _____ (Company) to deduct the amount of <u>                    </u> (amount in words and in figures) every payroll from my salary.			
Requested by:	Noted by:	Approved by:	
Employee's Signature Over Printed Name-Date	BM's Signature over Printed Name -Date	AM's Signature over Printed Name - Date	
TO BE FILLED OUT BY THE PAYROLL IN CHARGE			
<b>OUTSTANDING BALANCE</b>  EXISTING CASH ADVANCE: SSS LOAN: _____ PAG IBIG LOAN _____ HOUSING LOAN _____ MIC LOAN _____ SPARE PARTS _____ APPLIANCES _____ OTHERS: _____ TOTAL: _____	<b>PAYROLL DEDUCTION (MONTHLY/ SEMI MONTHLY)</b>  _____ _____ _____ _____ _____ _____ _____	EMPLOYMENT STATUS: _____  FIDELITY BOND: _____	
CHECK AND VERIFIED BY:	_____ Payroll in Charge-Date	APPROVED BY:	_____ HR Manager-Date
Receipt Confirmation:	I hereby receive the amount of _____  Received by: _____ <div style="text-align: center;">Signature over Printed Name-Date</div>		