

DATE

## **UNIVERSITY OF THE PHILIPPINES**

## TRI-COLLEGE

		(COLLEGE/UNIT) BILL FOR PAYMEN	Γ/SOA	
DATE:				
BILL/SOA NO.:				
Payor:			College/Office/Unit:	TriCollege
Purpose: (Payment Description)				
	Particulars	Ac	count Code	Amount Du
Tri-College Applica				100
_			Total	Php 100.00
		Slip or Linkbiz Confirmation Slip tog ish Office @ cashoffice.upd@up.edu	.ph ***	e emailed to the originating
Prepared By:				ox of the account to be used   ACCOUNT NUMBER 3072-1006-96
PRINTE DATE	ED NAME AND SIGNATURE DESIGNATION			
DATE				CASHIER'S COPY
DATE: BILL/SOA NO.:		UNIVERSITY OF THE  TRI-COLLEGE  (COLLEGE/UNIT)  BILL FOR PAYMEN		
_				TriCollege
Payor: Purpose:			College/Office/Unit:	Mcollege
(Payment Description)				
	Particulars	Ac	count Code	Amount Du
Tri-College Applica	ution fee			100
			Total	Php 100.00
		Slip or Linkbiz Confirmation Slip tog ish Office @ cashoffice.upd@up.edu	ı.ph	e emailed to the originating
Prepared By:			For Direct Deposit/Bank Transfer to UPD Landbank Account (check the box of the account to be used )  ACCOUNT NAME ACCOUNT NUMBER  UPD REVOLVING FUND 3072-1006-96	
PRINTE	ED NAME AND SIGNATURE DESIGNATION		_	

UNIT'S COPY