

**PROFORMA PAYMENT FORM**  
**(Appendix to Section 1102)**

BANGKO SENTRAL NG PILIPINAS  
 Manila

\_\_\_\_\_  
 (Name of Department/Office)

FOR -

The Director  
 Cash Department

Please issue OFFICIAL RECEIPT to \_\_\_\_\_ (name of payor) as  
 payment of \_\_\_\_\_ (nature of payment) and effect the following accounting entries:

Account	Code	Account Title/Description	DR/CR	Amount
		Accountee Type/Code/Name		

\_\_\_\_\_

Total Debit P \_\_\_\_\_  
 Total Credit P \_\_\_\_\_

Approved by: \_\_\_\_\_  
 (Name of BSP Official/Position)

Date: \_\_\_\_\_

Received by: \_\_\_\_\_

Official Receipt No: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_