



# PAYMENT SLIP

Validation (Not official unless machine validated)

(Client's copy)

For customer assistance, please call 811-9111 or email us at [crc@ucpb.com](mailto:crc@ucpb.com)



# PAYMENT SLIP

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Payment for (Name of Institution)

Date

111th PMA Annual Convention

Payor's Name

Subscriber Account No.

Contact No.

PMA Number

Other Information

Mode of Payment

PRC Number

Cash  Check  Debit

### CASH PAYMENT BREAKDOWN

Denomination	Quantity	Amount
<b>Total Cash Payment</b>		

### CHECK PAYMENT BREAKDOWN

(Indicate Subscriber name and account number at the back of each check and endorse properly)

Bank/Branch	Check Number	Amount
<b>Total Check Payment</b>		

### DEBIT FROM ACCOUNT

Account Number	Amount

Signature of Depositor

Signature of Depositor

Verified

Approved

This payment is made and accepted subject to the terms and conditions covering the payee's account with the institution indicated above.