

UNIONBANK

BILLS PAYMENT SLIP

PLEASE WRITE HEAVILY TO MAKE CARBON COPY CLEAR

PAYMENT FOR (COMPANY/INSTITUTION)

MODE OF PAYMENT

Cash

Check

Debit to Account

CLIENT NAME

IF DEBIT ACCOUNT, ACCOUNT NUMBER

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REFERENCE NUMBER (e.g. ACCOUNT NO. / CARD NO. / POLICY NO.)

IF RECEIVED BEYOND CUT-OFF TIME, I UNDERSTAND THAT MY PAYMENT IS RECEIVED FOR SAFEKEEPING ONLY & WILL BE POSTED ON THE NEXT BANKING DAY. IF OFFLINE, PAYMENT WILL BE POSTED UPON RESTORATION OF ON-LINE SERVICE.

CLIENT'S SIGNATURE

DATE

PLEASE LIST ON THE DETAILS COLUMN, IF CASH PAYMENT ITS DENOMINATION & NO. OF PIECES AND IF CHECK PAYMENT, THE CHECK DETAILS

DETAILS

IF CASH, DENOMINATION	NO. OF PIECES	AMOUNT	
IF CHECK, DRAWEE BANK / BRANCH	CHECK NUMBER		
TOTAL PAYMENT			

PAYMENT RECEIVED BY:

PROCESSED / DEPOSITED BY:

THANK YOU FOR BANKING WITH US.

MEMBER FDIC & 

www.unionbankph.com