

CENTRAL PHILIPPINE UNIVERSITY
5000 Iloilo City Philippines

OFFICE OF THE TREASURER

APPLICATION FOR CREDIT

DATE

Sir/Madam:

Concerning the accounts which has been charged against me as stated below:

Tuition & Fees

	NAME OF STUDENTS	COURSE & YEAR	AMOUNT
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____

Other Accounts (Pls specify)

Please collect from my semi-monthly salaries as follows:

MONTH	SALARY PERIOD	
	AMOUNT 15th	AMOUNT 30th/31st
June	_____	_____
July	_____	_____
August	_____	_____
September	_____	_____
October	_____	_____
November	_____	_____
December	_____	_____
January	_____	_____
February	_____	_____
March	_____	_____
April	_____	_____
May	_____	_____
Christmas Gift	_____	_____
13th Month Pay	_____	_____
Summer Bonus	_____	_____
Others	_____	_____
TOTAL	_____	_____

Approved:

Very truly yours,

RICHEL C. CELESTIAL
Credit & Collection Manager

Signature Over Printed Name

College/Department: _____
Status of Faculty/Staff
Full-time/Part-time
(Underline Status)