

**MGM Motor Trading Inc**  
**CHECK REQUISITION FORM**

Date : 11-11-2021 Dept. Code : \_\_\_\_\_  
Payee : ABELLAR, APRIL JOY V.

Description	Amount
LAST PAY	<u>3,939.49</u>

Requested check date : \_\_\_\_\_ Check release date : \_\_\_\_\_  
Requested by : [Signature] Approved by : [Signature]  
11/11/2021

<b>NET PAY</b> <u>3,939.49</u>	
Prepared by: <u>[Signature]</u> JOSEPHINE P. REPANE PAYROLL ASSISTANT/OFFICER	<u>10-28-2021</u> DATE
Reviewed by: <u>[Signature]</u> GODFREY O. CHALUYEN PAYROLL SUPERVISOR	<u>10-28-2021</u> DATE
I hereby acknowledge receipt of the <u>COMPUTATION OF MY LAST PAY</u> and attest my full understanding and agreement with the said computation.	
Conforme: <u>[Signature]</u> ABELLAR, APRIL JOY V. SIGNATURE OF SEPARATED EMPLOYEE	<u>11/11/2021</u> DATE