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

**JANICE B. SOLAYAO**

*Branch Manager*

Development Bank of the Philippines

Catarman, Northern Samar

Sir/Madam:

This is to request for the attached name **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  SubstituteTeacher I to be included in the ATM Payroll System thru your bank. Please furnish her/him with signature card and other requirement necessary for your validation.

Very truly yours,

**MICHELLE D. CAGUIMBAL**

 *Administrative Officer V*

LIST OF TEACHERS/OTHER PERSONNEL FOR ACCOUNT OPENING

Department of Education, Division of Northern Samar

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Division Code | Station Code | Employee Number | Name of Employee/Teacher(Given, Middle, Surname) | Account Number (To filled by the Bank) |
| 045 |  |  | **JUAN DELA CRUZ**   |  |
|  Verified Correct by:**GAUDENCIO C. ALJIBE, JR. PhD., CESO VI***Assistant Schools Division Superintendent**Officer – In – Charge**Office of The Schools Superintendent**For the SDS:***MICHELLE D. CAGUIMBAL** *Administrative Officer V* | This portion to be accomplished after account opening \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signature above printed name)ATM Servicing Branch Manager \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signature above printed name) |