


Sample Form

 PHILIPPINE DEPOSIT INSURANCE CORPORATION PAYING BANK RECEIPT	Date Paid	Clearing Account No. 1782-2220-97
	Paying Bank Reference No.	
IMPORTANT:	This receipt must cover assessment related items only. <input type="checkbox"/> ASD <input type="checkbox"/> ADEF <input type="checkbox"/> INT/PNY <input type="checkbox"/> OTH	
COLLECTING BANK Land Bank of the Philippines	BRANCH	Signature over Printed Name of Remitting Entity Representative
REMITTANCE RECEIVED FROM (Name of Bank):		
Total Amount Remitted in Pesos (In Words)		Payment Received by: (Teller's Name)
NATURE OF REMITTANCE	Amount (₱)	TELLER'S VALIDATION
1. Assessment Due (ASD) Amount appearing herein should tally with the RCS		
2. Assessment Deficiency (ADEF)		
3. Interest/Penalty (INT/PNY)		
4. Others: (specify) (OTH)		
Note: This serves as Confirmation Receipt if machine validated		
FORM OF REMITTANCE		AMOUNT ₱
CASH		
CHECK	Name of Bank/Branch	Check Number
FUND TRANSFER	Name of Bank/Branch	Account Number
Note: Reproduction of this form shall be the responsibility of the remitting bank. This form is downloadable from the PDIC website.		Original – LBP's Copy Duplicate – Remitting Entity (to be submitted to PDIC) Triplicate – Remitting Entity's Copy