Securities and Exchange Commission
PHILIPPINES

INFORMATION AND COMMUNICATIONS TECHNOLOGY DEPARTMENT

Request for ICTD Information Services

Date: _____ Control No: _____

☐ Statistics ☐ Company List ☐ Others

Description of Information Requested		Geography/Location	Period Covered	
PSIC	Industry Class		Start	End

Requested by:

_____ _____
Signature Over Printed Name Affiliation (School/Company/Others)

Address : _____ e-Mail : _____

_____ Contact No : _____

Purpose : _____

_____

Assessment :

Initial Payment _____ O.R. No. _____
Additional Fees
Processing Fee _____
CD Copy Fee _____
Other Fees _____
Total Amount _____ O.R. No. _____

Evaluated By :

_____

Approved By :

_____

OLIVER V. CHATO
Director, ICTD

Control No : _____
Date of Release : _____
Contact Person : Joy M. Paquiz
Telephone No/s : 8818 – 6894
8818 – 7204

CLAIM STUB

Upon claiming please present the original copy of the official receipt.