

**University of San Jose - Recoletos**

College of \_\_\_\_\_ Department of \_\_\_\_\_  
\_\_\_\_\_ Semester A.Y. \_\_\_\_\_

**Final Oral Defense Panel Members Payment form**

*(To be attached to the Payment Slip of the Accounting Office)*

	<i>No. of Pax</i>		<i>Rate</i>	<i>Total</i>
<i>Internal Panelist/s</i>	_____	x	800 =	_____
<i>External Panelist/s</i>	_____	x	1,000 =	_____
<i>Adviser's Fee</i>			1,000 =	_____
<i>Statistician's fee*</i>		x	1,000 =	_____
			<b>TOTAL</b>	_____

*\* optional*

*Prepared by:* \_\_\_\_\_  
*Group Leader*

*Noted by:* \_\_\_\_\_  
*Research Teacher*