

General Fund

ORDER OF PAYMENT

The Collecting Officer

Please issue **Official Receipt** in favor of **AXLE CASIPONG**  
*(Name of Payor)*

**Mbs Foodhouse Luray 1 Poblacion Toledo City**  
*(Address/Office of Payor)*

in the amount of **TWO HUNDRED AND FORTY PESOS AND ZERO CENTS** PHP **240.00**  
for the payment of **RROCFLMS (R) - Certificate Fee, Documentary Stamp Tax, Surcharge**

per *(Purpose)* **Statement of Account No.** dated **01/08/2025**

Please deposit the collections under Bank Account/s:

No.	Name of Bank	Amount
3402-2642-40	Land Bank of the Philippines	210.00
0152-1001-75	Land Bank of the Philippines	30.00
<b>TOTAL</b>		240.00

No.	
AMOUNT:	P240.00
Date:	
By:	