

General Fund

ORDER OF PAYMENT

The Collecting Officer

Please issue **Official Receipt** in favor of **ALFONSO ECARANUM EBANA**

(Name of Payor)

**Kalawisan LapuLapuÿ- City (opon)**

(Address/Office of Payor)

in the amount of **FIFTY PESOS AND ZERO CENTS** PHP **50.00**  
for the payment of **A - Examination Fee**

(Purpose)

per **Statement of Account No. 61-2025-09-0530** dated **08/09/2025**

Please deposit the collections under Bank Account/s:

No.	Name of Bank	Amount
3402-2642-40	Land Bank of the Philippines	50.00
0152-1001-75	Land Bank of the Philippines	0.00
<b>TOTAL</b>		<b>50.00</b>

No.	
AMOUNT:	<b>P50.00</b>
Date:	
By:	

**Janet Toroy**  
**ACCOUNTANT II**