

General Fund

ORDER OF PAYMENT

The Collecting Officer

Please issue **Official Receipt** in favor of **NILO AUTIDA TAÑO**

(Name of Payor)

Sitio Kahayag Maribago LapuLapuÿ- City (opon)

(Address/Office of Payor)

in the amount of **THREE HUNDRED AND THIRTY PESOS AND ZERO CENTS** PHP **330.00**

for the payment of **RROCFLMS (R) - Certificate Fee, Documentary Stamp Tax, Surcharge**

(Purpose)

per **Statement of Account No.** _____ dated _____

Please deposit the collections under Bank Account/s:

No.	Name of Bank	Amount
3402-2642-40	Land Bank of the Philippines	300.00
0152-1001-75	Land Bank of the Philippines	30.00
TOTAL		330.00

No.	
AMOUNT:	P330.00
Date:	
By:	
