

General Fund

ORDER OF PAYMENT

The Collecting Officer

Please issue **Official Receipt** in favor of

OZONE LASPOÑA LABRADA

(Name of Payor)

Lapasan Cagayan De Oro

(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.**

dated

26/08/2025

Please deposit the collections under Bank Account/s:

No.

3402-2642-40

0152-1001-75

Name of Bank

Land Bank of the Philippines

Land Bank of the Philippines

PHP

PHP

PHP

Amount

50.00

0.00

50.00

TOTAL

| | | |
|------|---------|--------|
| O.R. | No. | |
| | AMOUNT: | P50.00 |
| | Date: | |
| | By: | |