

NATIONAL TELECOMMUNICATIONS COMMISSION		Serial No. :	
Regional Office No. XIII		Date : Mar 18, 2024	
General Fund			
ORDER OF PAYMENT			
The Collecting Officer			
Please issue Official Receipt in favor of		FRANCIS ROTORAS JARIOLNE	
		(Name of Payor)	
RN Pelaez Blvd Kauswagan, CAGAYAN DE ORO			
		(Address/Office of Payor)	
in the amount of		ZERO PESOS AND ZERO CENTS	PHP 0
for the payment of			
(Purpose)			
per Statement of Account No.			dated
Please deposit the collections under Bank Account/s:			
No.	Name of Bank	PHP	Amount
		PHP	
		PHP	
TOTAL			
April Christian Sumarinas			

NATIONAL TELECOMMUNICATIONS COMMISSION		Serial No. :	
Regional Office No. XIII		Date : Mar 18, 2024	
General Fund			
ORDER OF PAYMENT			
The Collecting Officer			
Please issue Official Receipt in favor of		FRANCIS ROTORAS JARIOLNE	
		(Name of Payor)	
RN Pelaez Blvd Kauswagan, CAGAYAN DE ORO			
		(Address/Office of Payor)	
in the amount of		ZERO PESOS AND ZERO CENTS	PHP 0
for the payment of			
(Purpose)			
per Statement of Account No.			dated
Please deposit the collections under Bank Account/s:			
No.	Name of Bank	PHP	Amount
		PHP	
		PHP	
TOTAL			
April Christian Sumarinas			

NATIONAL TELECOMMUNICATIONS COMMISSION		Serial No. :	
Regional Office No. XIII		Date : Mar 18, 2024	
General Fund			
ORDER OF PAYMENT			
The Collecting Officer			
Please issue Official Receipt in favor of		FRANCIS ROTORAS JARIOLNE	
		(Name of Payor)	
RN Pelaez Blvd Kauswagan, CAGAYAN DE ORO			
		(Address/Office of Payor)	
in the amount of		ZERO PESOS AND ZERO CENTS	PHP 0
for the payment of			
(Purpose)			
per Statement of Account No.			dated
Please deposit the collections under Bank Account/s:			
No.	Name of Bank	PHP	Amount
		PHP	
		PHP	
TOTAL			
April Christian Sumarinas			

NATIONAL TELECOMMUNICATIONS COMMISSION		Serial No. :	
Regional Office No. XIII		Date : Mar 18, 2024	
General Fund			
ORDER OF PAYMENT			
The Collecting Officer			
Please issue Official Receipt in favor of		FRANCIS ROTORAS JARIOLNE	
		(Name of Payor)	
RN Pelaez Blvd Kauswagan, CAGAYAN DE ORO			
		(Address/Office of Payor)	
in the amount of		ZERO PESOS AND ZERO CENTS	PHP 0
for the payment of			
(Purpose)			
per Statement of Account No.			dated
Please deposit the collections under Bank Account/s:			
No.	Name of Bank	PHP	Amount
		PHP	
		PHP	
TOTAL			
April Christian Sumarinas			