

General Fund

ORDER OF PAYMENT

The Collecting Officer

Please issue **Official Receipt** in favor of

EXPRESSIONS MOBILE CENTER INCORPORATED

(Name of Payer)

Makuguihon Molave

(Address/Office of Payer)

in the amount of **THREE THOUSAND AND THIRTY PESOS AND ZERO CENTS** PHP **3,030.00**
for the payment of **RP (R) - Permit/Accreditation Fee, Inspection Fee, Surcharge, Documentary Stamp Tax**

(Purpose)

per Statement of Account No. **61-2025-11-0009** dated **29/10/2025**

Please deposit the collections under Bank Account/s:

No.	Name of Bank	Amount
3402-2642-40	Land Bank of the Philippines	PHP 3,000.00
0152-1001-75	Land Bank of the Philippines	PHP 30.00
TOTAL		PHP 3,030.00

O.R.	No.	AMOUNT:
		P3,030.00
	Date:	
	By:	

Jhocele Gween Pamas