## OBLIGATION REQUEST AND STATUS

RIMENT OF	à	Republic of Philippines  Department Of Health			No :	02011101-20180		
a a a a a a a a a a a a a a a a a a a	E				Date :		07/08/2018	
ALCHO MAL OFFICE		Regional Office 7			Fund :		02101101	
	u City							
Paye	<del>-</del>	LANDBANK OF THE PHILIPPINES						
Office		Department of Health						
Address		CEBU CITY						
Responsibility		Particulars		MFO/PAP		UACS Code/ Expenditure		Amount
STO-OPERATIONS  A. Certified:		AND LAUNDR PERSONNEL	PR No.					0.00
					t	available and obligated for the purpose/adjustment necesarry as		
	Charges to appropriatio/ allotment necessary, lawful and under my direct supervision; and supporting document valid, proper and legal			indicated ab	ove			
Signature :	GUY R. PEREZ, MD, RPT, FPSMS, MBAHA, CESE		Signature :	LEONORA A. ANIEL				
		- Chief - Regulation, Liscensing, Enforcement Division		Printed Name :	BUDGET OFFICER III			
Position :				Position :				
		Head Requesting C	_	Head, Budget Unit/Authorized Representative			Representative	
_			07/08/2018		07/08/2018			
Date :				Date :				
C. STAT				TUS OF OBLIGA	TION			
Reference			Amount					
Date	Pa	articulars	ORS/JEV/RCI/RADAI No.	Obligation		Payment	Not Yet Due	Due and Demandable
1	I			1				