OBLIGATION REQUEST AND STATUS

PIMENT OF	à	Republic of Philippines				No :	0	2011101-20180
J. S.	Ē	Department Of Health			Date :		09/10/2018	
TRETONAL OFFICE		Regional Office 7				Fund :		02101101
Central Visayas, Osmeña Blvd. Ceb				u City				
Payee		LANDBANK OF THE PHILIPPINES						
Office		Department of Health						
Address		CEBU CITY						
Responsibility		Particulars		MFO/PAP			UACS Code/ Expenditure Amount	
A. Certified: Charges to a supervision;		PAY OF DOH MONTH OF JA OF PO No.T01-00 DV No. T01-00		B. Certified Allotment indicated a		vailable and oblig	02000	30,000.00 30,000.00 oose/adjustment necessary as
Signature:			Signature :					
Printed Name :	ELIZABETH P. TABASA, CPA, MBA, CEO VI			Printed Name		LEONORA A. ANIEL		
Position :	Chief - Management Support Division		Position		BUDGET OFFICER III			
Dete	Head Requesting Office / Authorized Representative		Data	-	Head, Budget Unit / Authorized Representative			
C.	eta:		TUS OF OBLIGA	09/10/2018				
C.	Amount							
Date	Pá	Referen articulars	ORS/JEV/RCI/RADAI No.	Obligation		Payment	Not Yet Due	Due and Demandable
			Table					