OBLIGATION REQUEST AND STATUS

ATMENT OF	<u>à</u>	Republic of Philippines Department Of Health Regional Office 7					0	2011101-20180
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PROJUNAL OFFICE	E .							02101101
		Cen	tral Visayas, Osmeña Blvd. Ceb	u City				
Paye								
Office	e Departme	Department of Health						
Addres	SS CEBU CIT	Υ						
Responsi	bility	Particulars			MFO/PAP		Code/ nditure	Amount
PHM	PAY OF E MONTH O OF PO No. B9 18/05/20/6 8/29/24/09 DV No. B9 18/05/20/6	TO OBLIGATE PAYMENT OF LONGEVITY PAY OF DOH RO7 PERSONNEL FOR THE MONTH OF JANUARY 2018, IN THE AMOUNT OF PO No. B9-18- 18/05/20/06/07/26/27/0 8/29/24/09/25/10 DV No. B9-18- 18/05/20/06/07/26/27/0 8/29/24/09/25/10 Total 18/05/20/06/07/26/27/0 8/29/24/09/25/10				50101	01001 02000 02000	900,000.00 800,000.00 120,000.00
A.	Certified:	/25/	710	В.	Certified			
	Charges to appropriatio/ allotment necessary, lawful and under my direct supervision; and supporting document valid, proper and legal				Allotment available and obligated for the purpose/adjustment necesarry as indicated above			
Signature :	GUY R. PEREZ, MD, RPT, FPSMS, MBAHA, CESE			Signature :	LEONORA A. ANIEL			
Printed Name :	OIC - Chief - Regulation, Liscensing, Enforcement Division			Printed Name :	BUDGET OFFICER III			
Position :			Position :	_				
	Head Reque	Head Requesting Office / Authorized Representative				Head, Budget Unit/Authorized Representative		
		2018-06-13			2018-06-13			
Date :				Date :				
C.	STAT							
	Amount							
Date	Particulars	eren	ORS/JEV/RCI/RADAI No.	Obligation		Payment	Not Yet Due	Due and Demandable
			Table					
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