OBLIGATION REQUEST AND STATUS

ATMENT OF	à	Republic of Philippines Department Of Health			No :	0	2011101-20180	
N N N N N N N N N N N N N N N N N N N	E				Date :		2018-06-22	
REDOWN		Regional Office 7			Fund :		02101101	
AL OF		Cen	tral Visayas, Osmeña Blvd. Ceb	u City				
Payee LANDBANK OF THE PHILIPPINES			OF THE PHILIPPINES					
Office		Department of Health						
Address CEBU CITY								
Responsibility		Particulars		MFO/PAP			UACS Code/ Expenditure Amount	
A. Certified: Charges to supervision;		PAY OF DOH MONTH OF J, OF PO No. DV No. T01-0	PR No. OO2 Total ont necessary, lawful and under my direct ument valid, proper and legal	B. Certified:		zailable and obligove		800,000.00 800,000.00 sose/adjustment necesarry as
Signature : GUY R. PERE			, RPT, FPSMS, MBAHA, CESE	Signature : Printed Name :	LEONORA A. ANIEL			
		- Chief - Regulation	hief - Regulation, Liscensing, Enforcement Division		BUDGET OFFICER III			
Position :				Position :				
		Head Requesting C]	Head, Budget Unit/Authorized Representative				
			2018-06-22		2018-06-22			
Date :				Date :	-			
			074	THE OF OR ICA	TION			
C. STAT				TUS OF OBLIGATION Amount				
Noticionic						7		
Date	P	articulars	ORS/JEV/RCI/RADAI No.	Obligation		Payment	Not Yet Due	Due and Demandable
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