


# OBLIGATION REQUEST AND STATUS

 <b>Republic of Philippines</b> <b>CENTER for HEALTH DEVELOPMENT VII</b> <b>Regional Office 7</b> <b>Central Visayas, Osmeña Blvd. Cebu City</b>			<b>No :</b> <u>01 - 01101101 - 2018-11 - 1</u>			
			<b>Date :</b> <u>11/30/2018</u>			
			<b>Fund :</b> <u>01-01101101</u>			
<b>Payee</b>	<b>STO-PS</b>					
<b>Office</b>	<b>Department of Health</b>					
<b>Address</b>						
<b>Responsibility Center</b>	<b>Particulars</b>	<b>MFO/PAP</b>	<b>UACS Code/ Expenditure</b>	<b>Amount</b>		
STO-PS 501	to obligate all transaction from January to November 2018	200000100002000	5010101001	38,211,120.52		
			5010201001	1,914,636.33		
			5010202000	247,500.00		
			5010203001	247,500.00		
			5010204001	488,000.00		
			5010205003	2,363,000.00		
			5010206004	245,168.17		
			5010211005	11,273,945.81		
	PO No. DV No. 2018-0005	PR No.	Total	72,720,311.93		
<b>A.</b>	<b>Certified:</b> Charges to appropriation/ allotment necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal		<b>B.</b>	<b>Certified:</b> Allotment available and obligated for the purpose/adjustment necessary as indicated above		
Signature :		Signature :				
Printed Name : <b>ELIZABETH P. TABASA, CPA, MBA, CEO VI</b>		Printed Name : <b>LEONORA A. ANIEL</b>				
Position : <b>Chief - Management Support Division</b>		Position : <b>BUDGET OFFICER III</b>				
Head Requesting Office / Authorized Representative		Head, Budget Unit / Authorized Representative				
Date :		Date		<b>12/19/2018</b>		
<b>C. STATUS OF OBLIGATION</b>						
<b>Reference</b>			<b>Amount</b>			
<b>Date</b>	<b>Particulars</b>	<b>ORS/JEV/RCI/RADAI No.</b>	<b>Obligation</b>	<b>Payment</b>	<b>Not Yet Due</b>	<b>Due and Demandable</b>
	Obligation	01 - 01101101 - 2018-11 - 1	72,720,311.93	40,000,000.00		
Totals			72,720,311.93			