



OBLIGATION REQUEST AND STATUS

|  <div style="text-align: center;"> Republic of Philippines Department Of Health Regional Office 7 Central Visayas, Osmeña Blvd. Cebu City </div> | | | | | | No : 2018-01-08-64 Date : 09/03/2018 Fund : 02101101 | |
|--|--|---|---------------------------|--------------------|-------------|---|--|
| Payee | | LANDBANK OF THE PHILIPPINES | | | | | |
| Office | | Department of Health | | | | | |
| Address | | CEBU CITY | | | | | |
| Responsibility | Particulars | MFO/PAP | UACS Code/ Expenditure | Amount | | | |
| RRHFS | TO OBLIGATE PAYMENT OF LONGEVITY PAY OF DOH RO7 PERSONNEL FOR THE MONTH OF JANUARY 2018, IN THE AMOUNT OF | | 5010101001 | 15,000.00 | | | |
| | PO No. | PR No. | | | | | |
| | DV No. T01-0002 | Total | | 15,000.00 | | | |
| A. Certified: | | B. Certified: | | | | | |
| Charges to appropriation/ allotment necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal | | Allotment available and obligated for the purpose/adjustment necessary as indicated above | | | | | |
| Signature : | | Signature : | | | | | |
| Printed Name : RAMIL R. ABREA, CPA, MBA | | Printed Name | | LEONORA A. ANIEL | | | |
| Position : OIC- Chief - Management Support Division NIR | | Position | | BUDGET OFFICER III | | | |
| | | | | | | | |
| Head Requesting Office / Authorized Representative | | Head, Budget Unit / Authorized Representative | | | | | |
| Date : | | Date | | 09/03/2018 | | | |
| C. | | STATUS OF OBLIGATION | | | | | |
| Reference | | | Amount | | | | |
| Date | Particulars | ORS/JEV/RCI/RADAI No. | Obligation | Payment | Not Yet Due | Due and Demandable | |
| | | | | | | | |
| | | | | | | | |
| | Totals | | | | | | |

OBLIGATION REQUEST AND STATUS

|  <div style="text-align: center;"> Republic of Philippines Department Of Health Regional Office 7 Central Visayas, Osmeña Blvd. Cebu City </div> | | | | | | No : 2018-01-08-65 Date : 09/03/2018 Fund : 02101101 | |
|--|--|---|---------------------------|-----------|-------------|---|--|
| Payee | | LANDBANK OF THE PHILIPPINES | | | | | |
| Office | | Department of Health | | | | | |
| Address | | CEBU CITY | | | | | |
| Responsibility | Particulars | MFO/PAP | UACS Code/ Expenditure | Amount | | | |
| RRHFS | TO OBLIGATE PAYMENT OF CLOTHING ALLOWANCE OF DOH RO7 PERSONNEL FOR CY 2018, IN THE AMOUNT OF | | 5010101001 | 70,000.00 | | | |
| | PO No. | PR No. | | | | | |
| | DV No. T01-0001 | Total | | 70,000.00 | | | |
| A. Certified: | | B. Certified: | | | | | |
| Charges to appropriation/ allotment necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal | | Allotment available and obligated for the purpose/adjustment necessary as indicated above | | | | | |
| Signature : | | Signature : | | | | | |
| Printed Name : RAMIL R. ABREA, CPA, MBA | | Printed Name LEONORA A. ANIEL | | | | | |
| Position : OIC- Chief - Management Support Division NIR | | Position BUDGET OFFICER III | | | | | |
| Head Requesting Office / Authorized Representative | | Head, Budget Unit / Authorized Representative | | | | | |
| Date : | | Date 09/03/2018 | | | | | |
| C. STATUS OF OBLIGATION | | | | | | | |
| Reference | | | Amount | | | | |
| Date | Particulars | ORS/JEV/RCI/RADAI No. | Obligation | Payment | Not Yet Due | Due and Demandable | |
| | | | | | | | |
| Totals | | | | | | | |