


OBLIGATION REQUEST AND STATUS

 <p>Republic of Philippines Department of Health Central Visayas Center for Health Development Central Visayas, Osmeña Blvd. Cebu City</p>			No : 5555 - 10101 - 2019-02 - 13			
			Date : 02/07/2019			
			Fund : 5555- 10101			
Payee	a					
Office	Department of Health					
Address	a					
Responsibility Center	Particulars	MFO/PAP	UACS Code/ Expenditure	Amount		
TEST 12345	a	200000100002000	5010102000	600.00		
			5010202000	6,000.00		
	PO No. a PR No. a DV No. a Total			6,600.00		
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 :			Printed Name	LEONORA A. ANIEL		
Position :			Position	BUDGET OFFICER III		
	Head Requesting Office / Authorized Representative			Head, Budget Unit / Authorized Representative		
Date :			Date	02/07/2019		
C.	STATUS OF OBLIGATION					
Reference			Amount			
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable
02/07/2019	Obligation	5555 - 10101 - 2019-02 - 13	6,600.00	2,000.00		
01/17/2019		SSS-123		700.00	5,900.00	
02/21/2019		SSS-11111		600.00	6,000.00	
		Totals	6,600.00			