OBLIGATION REQUEST AND STATUS

STIMENT OF	à	Republic of Philippines				No :	02011101-20180	
A H		Department Of Health				Date :		08/15/2018
Archoner Account with Line		Regional Office 7				Fund :		02101101
	Cen	u City						
Payee		LANDBANK OF THE PHILIPPINES						
Office		Department of Health						
Address		CEBU CITY						
Responsibility		Particulars		MFO/PAP		UACS Code/ Expenditure		Amount
PAY OF DOH MONTH OF JA OF PO No.PR-201 DV No. T01-00 A. Certified:		PAY OF DOH MONTH OF JA OF PO No.PR-20 ⁻ DV No. T01-00	E PAYMENT OF LONGEVITY RO7 PERSONNEL FOR THE ANUARY 2018, IN THE AMOUNT 18-01-08 PR No. P0-2018-01-31 002 Total ent necessary, lawful and under my direct uments valid, proper and legal	B. Certified: Allotment avindicated ab		ailable and oblig	ated for the purp	0.00 ose/adjustment necessary as
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	08/15/2018				
C.	TUS OF OBLIGATION Amount							
Refer			ce			AIII	Juni	
Date	P	articulars	ORS/JEV/RCI/RADAI No.	Obligation		Payment	Not Yet Due	Due and Demandable