OBLIGATION REQUEST AND STATUS

THE NEW OF THE PERSON OF THE P		Republic of Philippines Department Of Health				No :	02	2011101-20180	
					Date :		10/02/2018		
		Regional Office 7				Fund :		02101101	
VAL OFF		Cen	Central Visayas, Osmeña Blvd. Cebu City						
Paye	e	LANDBANK OF THE PHILIPPINES							
Office		Department of Health							
Address		CEBU CITY							
Responsibility		Particulars		MFO/PAP		UACS Code/ Expenditure		Amount	
A. Certified:		PO No. DV No. T01-00	V No. T01-0049 Total		B. Certified: Allotment avindicated ab		01001 04001	150,000.00 ose/adjustment necessary as	
Signature : Printed Name :	ELIZABETH P. TABASA, CPA, MBA, CEO VI			Signature : Printed Name		LEONORA A. ANIEL			
Position :	Chief - Management Support Division		Position		BUDGET OFFICER III				
Date :	Head Requesting Office / Authorized Representative		Date		Head, Budget Unit / Authorized Representative				
C.					OF OBLIGATION				
<u>. </u>	Referen	Amount							
Date	Pa	articulars	ORS/JEV/RCI/RADAI No.	Obligation	1	Payment	Not Yet Due	Due and Demandable	