


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 - 14			
			Date : 02/21/2019			
			Fund : 5555- 10101			
Payee	a					
Office	Department of Health					
Address	a					
Responsibility Center	Particulars		MFO/PAP	UACS Code/ Expenditure	Amount	
TEST 12345	a		200000100002000	5010101001	2,000.00	
				5010102000	6,000.00	
	PO No. a PR No. a DV No. a Total				8,000.00	
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 :			Printed Name	LEONORA A. ANIEL		
Position :			Position	BUDGET OFFICER III		
	Head Requesting Office / Authorized Representative			Head, Budget Unit / Authorized Representative		
Date :			Date	02/08/2019		
C.	STATUS OF OBLIGATION					
Reference			Amount			
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable
02/21/2019	Obligation	5555 - 10101 - 2019-02 - 14	8,000.00			
02/14/2019				1,500.00	6,500.00	
02/15/2019				4,500.00	2,000.00	
02/21/2019				600.00	1,400.00	
Totals			8,000.00			