



WITH CASH CARDS

PAYROLL FOR JOB PERSONNEL
DOH-RO7
January 16-31, 2017

We acknowledge receipt of the sum shown opposite our names as full remuneration for services rendered for the period started: *NO WORK NO PAY POLICY

TIN	Name		Position	MO. RATE	HALF MO.	Adjustment	Tardiness	Net Amount	DEDUCTIONS								Total Amt.	REMARKS			
							Absences		W/Tax 10%	W/Tax 3%	W/Tax 2%	Coop	Disallow.	Pag-Ibig	PHIC	GSIS	Excess Mobile				
	INFORMATION AND COMMUNICATION TECHNOLOGY UNIT																				
	ALEX	ALUETA	Carpenter	12,000.00	6,000.00	0.00	56.82	5,943.18	0.00	178.30	118.86	0.00	0.00	0.00	0.00	0.00	0.00	5,646.02			
								5,943.18													
		Page Total		12,000.00	6,000.00	0.00	56.82	5,943.18	0.00	178.30	118.86	0.00	0.00	0.00	0.00	0.00	0.00	5,646.02			
		Grand Total		12,000.00	6,000.00	0.00	56.82	5,943.18	0.00	178.30	118.86	0.00	0.00	0.00	0.00	0.00	0.00	5,646.02			
A		CERTIFIED Services duly rendered as stated								C		APPROVED FOR PAYMENT:									
		THERESA Q. TRAGICO Administrative Officer V Signature over Printed Name of Authorized Official										SOPHIA M. MANCAO,MD,DPSP OIC - Asst. Director (Signature over Printed Name) Head of Agency/Authorized Representative									
		Date										Date									
B		CERTIFIED Supporting documents complete and proper; and cash available in the amount of P_____								D		CERTIFIED Each employee whose name appears on the payroll has been paid the amount as indicated opposite his/her name									
		ANGIELINE T. ADLAON,CPA,MBA Accountant III (Signature over Printed Name) Head of Accounting Division/Unit										JOSEPHINE D. VERGARA Administrative Office V (Signature over Printed Name) Disbursing Officer									
		Date										Date									