Payee NORMAN O. VILLAS TIN/Employee No.: ORS/BURS No.: Particulars Responsibility Center MFO/PAP Amount PAYMENT for service rendered as Project Staff (L2) for the research project titled "Inter-Consortia Convergence in Socio-Economics Reb." Institutionalization of Socio-Economics Research and Data Economics Centers in Consortia Operations" for the period May 1 - December 31, 2021 in the amount of Monthly honorarium PhP 6000 Net amount Outs Amount Due Amount Due Account Title UACS Code Debit Credit C. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. B. Accounting Entry: C. Certified: D. Approved for Payment C. Certified: D. Approved for Payment C. Certified: Supporting documents complete and amount claimed proper Signature Supporting documents complete and amount claimed Printed Name NICK FREDDY R BELLO Position Head, Accounting Unit/Authorized Representative Date Date Date Debit Account Position Agency Head/Authorized Representative Particulars Conscipling Connections (NFREDDY R BELLO Position Agency Head/Authorized Representative Date						Fund Cluster :	
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