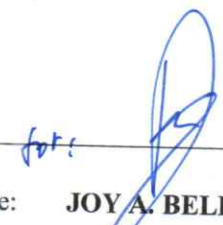


OBLIGATION REQUEST AND STATUS OFFICE OF THE DIRECTOR OF NSTP Entity Name					Serial No. : Date : January 30, 2024 Fund Cluster :			
Payee	HOSTEL							
Office	VSU							
Address	Visca, Baybay City, Leyte							
Responsibility Center	Particulars	MFO/PAP	UACS Object	Amount				
NSTP	To fund transfer of payment of billeting(HOSTEL).			800.00				
Total				800.00				
A.	Certified: Charges to appropriation/alloment are necessary, lawful and under my direct supervision;and supporting documents valid, proper and legal Signature  Printed Name: JOY A. BELLEN Position: NSTP Director Head, Requesting Date: _____				B.	Certified: Allotment available and obligated for the purpose/adjustment necessary as indicated above Signature _____ Printed Name: ALICIA M. FLORES Position: Head, Budget Office Representative Date: _____		
C.								
STATUS OF OBLIGATION								
Reference			Amount					
Date	Particulars	ORS/JEV/Check/ ADA/TRA No.	Obligation	Payable	Payment	Balance		
						Not Yet Due	Due and Demandable	
			(a)	(b)	(c)	(a-b)	(b-c)	
			800.00		800.00			