


| OBLIGATION REQUEST AND STATUS   |  |                           |  | Serial No. : _____                  |         |               |                    |
|---|--|---------------------------|--|-------------------------------------|---------|---------------|--------------------|
| Entity Name _____   |  |                           |  | Date : <u>February 27, 2023</u>     |         |               |                    |
|   |  |                           |  | Fund Cluster : <u>VSU-IP-2021-3</u> |         |               |                    |
| Payee   | <b>RAY O. CAINTIC</b>                        |                           |  |                                     |         |               |                    |
| Office  | DEPARTMENT OF AGRONOMY                       |                           |  |                                     |         |               |                    |
| Address   | VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE |                           |  |                                     |         |               |                    |
| Responsibility Center   | Particulars                                  | MFO/PAP                   | UACS Object Code   | Amount                              |         |               |                    |
| VSU-IP-2021-3   | "JO WAGES (February 1-28, 2023)              |                           |  | Php 12,359.60                       |         |               |                    |
|   | Total  |                           |  | Php 12,359.60                       |         |               |                    |
| <b>A. Certified:</b> Charges to appropriation/allotment are necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal<br><br>Signature : <br>Printed Name: <b>DIONESIO M. BAÑOC</b><br>Position : <u>PROJECT LEADER</u><br>Head, Requesting Office/Authorized Representative<br>Date : _____ |  |                           | <b>B. Certified:</b> Allotment available and obligated for the purpose/adjustment necessary as indicated above<br><br>Signature : _____<br>Printed Name: <u>ALICIA M. FLORES</u><br>Position : _____<br>Head, Budget Division/Unit/Authorized Representative<br>Date : _____ |                                     |         |               |                    |
| <b>C. STATUS OF OBLIGATION</b>  |  |                           |  |                                     |         |               |                    |
| 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)              |
|   | Obligations                                  |                           | Php 12,359.60  |                                     |         | Php 12,359.60 |                    |
|   | Totals                                       |                           | Php 12,359.60  |                                     |         | Php 12,359.60 |                    |