Payee: Ir Office: S		STATE UNIVERSITY Baybay City, Leyte	esconomo.	Date:	August 8, 202	22	
Office: S Address: V	nnove Enior High		escure b	Tund.	Name and Address of the Owner, where the Publisher of the Owner, where the Publisher of the Owner, where the Owner, while the Owner, where the Owner, while the		
Office: S Address: V	nnove Enior High			Fund:	GF		
Address: V						DA SAL	
	'SU	SCHOOL					
Responsibilit							
y Center		Particulars	4	MFO/PAP	UACS Code / Expenditure	Amount	
WAF		ent of TELEPHONE BILL GL unt number 918302292 pe		301000000	5020502002	7,887.55	
		NE 16, 2022 - JULY 15, 20			MFORPAR	Auge	
SU SENR MYMENT M	OR BIG telephone	R SCHOOL sypromen of Globs	Total			7,887.55	
COLUMN TOWARD IN	and the second	ul and under my direct supervision documents valid, proper and lega		purpose/adjustment necessary as indicated above			
Printed Name	SHALOM GRACE C. SUGANO		Printed Name	AL	ALICIA M. FLORES		
Position	HEAD		Position	ion OIC, BUDGET OFFICE Head, Budget Unit/Authorized Representative		CE	
Gross	Principal, IHS-SHS/Authorized Representative		55				
Date			Date		011107 (441011204)	оргооспише	
С		STATU	IS OF OBLI	GATION			
	Refe	rence	Amount				
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable	
0	bligation	No.:	7,887.55	ST. OPENDAME	7,887.55		
		Totals	7,887.55	LIBRA	7,887.55		