

**OBLIGATION REQUEST AND STATUS**

Serial No. : \_\_\_\_\_

Date : August 28, 2025

Fund Cluster : \_\_\_\_\_

**Entity Name**

Payee	<b>VERMICULTURE Project</b>			
Office	Eco-FARMI			
Address	VSU, Baybay City, Leyte			
Responsibility Center	Particulars	MFO/PAP	UACS Object Code	Amount
	For the payment of four (4) sacks of Vermicast			2,400.00
	Total			2,400

**A. Certified:** Charges to appropriation/alloment are necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal

Signature : \_\_\_\_\_

ROMEL B. ARMECIN

Position : Project Leader

Date : \_\_\_\_\_

**B. Certified:** Allotment available and obligated for the purpose/adjustment necessary as indicated above

Signature \_\_\_\_\_

Printed Name ALICIA M. FLORESPosition Head, Budget Division/Unit/Authorized Representative

Date \_\_\_\_\_

**C. STATUS OF OBLIGATION**

Reference			Amount				
Date	Particulars	ORS/JEV/Check/ ADA/TRA No.	Obligation	Payable	Payment	Balance	
			(a)	(b)	(c)	Not Yet Due	Due and Demandable
						(a-b)	(b-c)