

We acknowledge receipt of cash shown opposite our name as full compensation for services rendered for the period covered.

N A M E	Wage/day or Wage/month	No. of Days	FUND CHARGING	GROSS AMOUNT	PAG-IBIG					WITHHOLDING TAX	NET AMOUNT	SIGNATURE
					PREMIUM	MP2	Multi-Purpose Loan (MPL)	Calamity Loan (CAL)				
FAUSTINO D. SAURO	561.80	14.00	EFARM I, A, III, C	7,865.20	100.00						7,765.20	
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TOTAL				7,865.20	100.00	-	-	-	-	-	7,765.20	

C. APPROVED FOR PAYMENT:

ORS/URS No. : _____
Date : _____
JEV No. : _____
Date : _____