## Annex F **OBLIGATION REQUEST AND STATUS** No: MOOE 02-101101-2021 Date: VISAYAS STATE UNIVERSITY Visca, Baybay City, Leyte Fund: Charlie Mark Cutamora Payee Motor Pool/PPO Office Address Responsibility UACS Code/ MFO/PAP **Particulars** Amount Expenditures Center Payment of Per Diem... 5020101000 750.00 TOTAL 750.00 B Certified: A Certified Charges to appropriation/allotment Allotment available and necessary, lawful and under my direct superobligated for the purpose/ vision and supporting documents valid, proper adjustment necessary as and legal indicated above Signature Signature **Printed Name ELWIN JAY V. YU Printed Name ALICIA M. FLORES** Position Chief of Hospital Position Head, Budget Office Budget Unit/Authorized Representative Date Date STATUS OF OBLIGATION C Reference Amount Due and Date **Particulars** ORS/JEV/RC/RADAI No. Obligation Payment Not Yet Due Demandable Obligation MOOE 02-101101-2021 750.00 750.00

I CERTIFY that (1) I have received the fore going itinerary (2) the travel is necessary to the service, the period cover is reasonable and (3) the expenses claimed are proper.

TYPE OF VEHIC

TOTALS

TOTAL Prepared by: (Official, Employee)

CHARLIE MARK CUTAMORA

750.00

Approved by: (Head of Agency)