

CHECK DEPOSIT SLIP



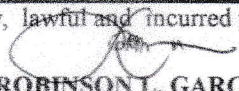



CHECK DEPOSIT SLIP



LANDBANK

ACCOUNT NAME VSU PCC		DATE 11/23/2021	Check one applicable box below. Use separate slip for each type of deposit. <input type="checkbox"/> On-Us <input type="checkbox"/> Other Bank	
ACCOUNT NUMBER 3 5 7 2 1 0 0 0 3 0		BRANCH OF ACCOUNT (for interbranch deposit)	CHECK BREAKDOWN	
For transactions amounting to more than P500,000.00 please indicate source of fund. payment for purchased dairy products			NAME OF BANK/BRANCH	CHECK NUMBER
			2357-9001-77	0000091615
				AMOUNT
				2,671,305.00
I/we hereby agree that in case any of my/our check deposit fails to conform with the Image Quality Assurance validation, the amount rejected shall be deducted from my/our deposit.				
In case of interbranch deposit, I/we further agree to pick-up any returned check at this branch or at the branch where my/our deposit account is maintained.				
QUEEN-EVER Y. ATUPAN DEPOSITOR/REPRESENTATIVE (Signature over Printed Name)				
Contact No.			TOTAL CHECK DEPOSIT	2,671,305.00
Teller's Validation T2 2PRI 23NOV2021 14:39:59 3572-1000-30 VSU PCC FUND 0790 CONUS P2,671,305.00				
THIS DEPOSIT IS SUBJECT TO THE TERMS AND CONDITIONS COVERING THIS ACCOUNT.				

Revised June 2017

 Department of Education BAYBAY CITY DIVISION Baybay City, Leyte				Fund Cluster : 01	
					Date : DV No. :
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)				
Payee	PHILIPPINE CARABAO CENTER		TIN/Employee No.:	ORS/BURS No.: 02-101101-2021-11-01271	
Address					
Particulars			Responsibility Center	MFO/PAP	Amount
To record payment on the PROVISION & DELIVERY OF PASTEURIZED FRESH MILK FOR SCHOOL BASED FEEDING PROGRAM (MILK COMPONENT)					2,671,305.00
Amount Due					2,671,305.00
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
 ROBINSON L. GARCIA, EdD. CES - SGOD					
B. Accounting Entry:					
Account Title		UACS Code	Debit	Credit	
Due from Government-Owned & Controlled Corporations (GOCCs)		1030302000	2,671,305.00		
Cash - MDS, Regular		1010404000		2,671,305.00	
			2,671,305.00	2,671,305.00	
C. Certified:			D. Approved for Payment		
<input checked="" type="checkbox"/> Cash available <input checked="" type="checkbox"/> Subject to Authority to Debit Account (when applicable) <input checked="" type="checkbox"/> Supporting documents complete and amount claimed proper					
Signature			Signature		
Printed Name	RUTHLYN POSAS-REBUCAS, CPA		Printed Name	CARMELINO P. BERNADAS, Ph.D., CESO VI	
Position	Accountant III Head, Accounting Unit/Authorized Representative		Position	OIC - Schools Division Superintendent Agency Head/Authorized Representative	
Date			Date	11/16/21	
E. Receipt of Payment					JEV No.
Check/ ADA No. :		Date :	Bank Name & Account Number:		
Signature :		Date : 11/22/21	Printed Name:	Date	
Official Receipt No. & Date/Other Documents					