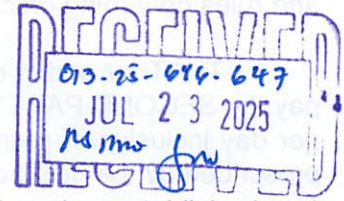




**CONTRACT OF SERVICE FOR INDIVIDUAL JOB ORDER WORKER**

KNOW ALL MEN BY THESE PRESENTS:

This Agreement entered by and between:



The **VISAYAS STATE UNIVERSITY**, an institution of higher learning established under Presidential Decree No. 470 as amended by Presidential Decree No. 700 and converted into a state university by virtue of Republic Act No. 9158 and renamed as Visayas State University by virtue of Republic Act No. 9347, with principal office at Baybay City, Leyte, duly represented by its President **DR. PROSE IVY G. YEPES**, hereinafter referred to as the **FIRST PARTY**;

and-

**HELEN P. ITABLE, LICHELL BHONG B. ARBISO**, of legal age, Single/Married, Filipino and with residence and postal address at, Biasong Baybay City, Leyte, Linao Ormoc City, Leyte, hereinafter referred to as the **SECOND PARTY**;

**WITNESSETH:**

WHEREAS, the FIRST PARTY is in need of persons who can provide administrative support services which cannot be performed by the existing regular manpower/employees of the specific units/departments/centers within the university;

WHEREAS, the SECOND PARTY, possesses the required qualification and expertise needed by the hiring department/center/unit/office and is willing to provide the services needed;

NOW, THEREFORE, premises considered, the parties hereto hereby agree as they have agreed under the terms and conditions, as follows:

The FIRST PARTY hereby contracts the services of the SECOND PARTY as **Administrative Aide III** to perform the functions and deliver the following outputs as follows:

**HELEN P. ITABLE**

1. Prepares journal entries, voucher for 101 Trust Projects.
2. Controls earmarks PR's, appointments under 101 Trust Projects.
3. Obligates vouchers, payrolls and PO's under 101 Trust Projects.
4. Liquidates obligated vouchers, payrolls and PO's under 101 Trust Projects.
5. Prepares quarterly, semi-annual, annual/terminal Financial Report on each projects.
6. Reconciliation of Prior Years/Idle Accounts.
7. Performs other tasks as assigned by superior from time to time.

**LICHELL BHONG B. ARBISO**

1. Prepares journal entries, voucher for 101 Trust Projects.
2. Controls earmarks PR's, appointments under 101 Trust Projects.
3. Obligates vouchers, payrolls and PO's under 101 Trust Projects.
4. Liquidates obligated vouchers, payrolls and PO's under 101 Trust Projects.
5. Prepares quarterly, semi-annual, annual/terminal Financial Report on each projects.
6. Reconciliation of Prior Years/Idle Accounts.
7. Performs other tasks as assigned by superior from time to time.



**ACCOUNTING**

Visayas State University, Baybay City, Leyte  
Email: [accounting@vsu.edu.ph](mailto:accounting@vsu.edu.ph)  
Website: [www.vsu.edu.ph](http://www.vsu.edu.ph)  
Phone: +63 53 565 0600 Local 1006



THAT when the work demand for travel, the **SECOND Party** shall be entitled to payment of travel expenses (per diem and fare) when travelling on official business within the country subject to existing government accounting rules and regulations and to pertinent VSU policies and rules governing official travel.

THAT for and in consideration of the foregoing service, the **FIRST PARTY** binds itself to pay the **SECOND PARTY** in the amount of **SIX HUNDRED THREE & FORTY CENTS (P603.40)** per day inclusive of premium at not less than 8 hours per day based on the work schedule as prescribed by the hiring department/office/center/unit;

The **SECOND PARTY** will be paid twice a month (per *quincena*) upon presentation of a certification of accomplishments and rendition of actual services issued by the **FIRST PARTY** or it's duly authorized representative. The above payments will be charged to **101T 20201050-6**;

THAT this contract shall take effect **July 21, 2025**, until **December 31, 2025**, and may be renewed only upon recommendation of the head of the unit/department/office, duly supported with a copy of an evaluation report as to the quality of services rendered and quantity of the outputs delivered by the Job Order Worker for the period they were under contract of service by the university.

THAT the effectivity of this contract of services shall be subject to availability of funds and shall be deemed automatically terminated should the source of funds where this contract is charged is already depleted

**Confidentiality Clause:** The **SECOND PARTY** is required to turn-over the data materials, equipment, and other things that come into his/her possession because of his/her job and preserve the confidentiality of any information regarding the University, faculty, staff, and students. Any disclosure and divulgement of confidential information (including personal information kept on computer or other media, research, technologies, and manuals) made unlawfully outside the proper course of duty will be grounds for dismissal without prejudice to filing of appropriate case in Court. The confidentiality clause will still apply even if the **SECOND PARTY** is no longer connected with VSU unless the University gives its express consent.

That this contract of service may also be terminated by the **FIRST PARTY** before the end of the stipulated term when the services is no longer needed or whenever the **SECOND PARTY** violates rules and regulations of the university or for unsatisfactory performance of the task assigned.

IN WITNESS THEREOF, the parties have hereunto set their hands this  
\_\_\_\_\_ at Baybay City, Leyte, Philippines.

VISAYAS STATE UNIVERSITY  
Baybay City

By:

  
**PROSE IVY G. YEPES**

President  
(First Party)

  
**HELEN P. ITABLE**

(Second Party)

  
**LICHELL BHONG B. ARBISO**

(Second Party)

Signed in the presence of:

  
1. **NICK FREDDY R. BELLO**

Head, Accounting Office

2. **LUVILLA G. ALCOBER**

Head, RSPPRO

REPUBLIC OF THE PHILIPPINES )  
PROVINCE OF LEYTE ) S.S.  
CITY OF BAYBAY )

BEFORE ME, a Notary Public for and in the City of Baybay, Leyte, Philippines, this 28th day of 2025 JNL, personally appeared Dr. Prose Ivy G. Yepes with VSU ID No. 002163 and HELEN P. ITABLE, and LICHELL BHONG B. ARBISO, with valid ID Philhealth No. 13-025606588-7, and Philhealth No. 13-250757377-4 and respectively, known to me to be the same persons who executed the foregoing instrument and they acknowledged to me that the same is their voluntary act and deed, as well as the parties hereto.

WITNESS MY HAND AND SEAL on the date and place first above given.

Notary Public

  
**ATTY. RYSAN C. GUINOCOR**

Notary Public

Until December 31, 2025

PTR No. 0327797-Baybay City, Leyte-1/17/2025

IBP No. 503557-Tacloban City-01/09/2025

Roll of Attorneys No. 57467

MCLE No. VII-0022195-04/14/2025

VSU, Baybay City, Leyte

Doc. No. 1284

Page no. 99

Book No. CUU

2025

Vision:

A global green university providing progressive leadership in agriculture, science & technology, education, and allied fields for societal transformation.

Mission:

To produce graduates equipped with advanced knowledge and lifelong learning skills with ethical standards through high quality instruction, innovative research, and impactful community engagements.

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FM-LEG-03

V02 06-20-2025

No.



VISAYAS STATE UNIVERSITY  
PERSONAL DATA SHEET  
For Job Order Workers



HELEN P. ITABLE

Print legibly. Mark appropriate boxes ☐ with " " and use separate sheet if necessary.

1. SURNAME		I T A B L E			
FIRST NAME		H E L E N			
MIDDLE NAME		P A L C O		2. NAME EXTENSION (e.g. Jr., Sr., etc.)	
3. DATE OF BIRTH (mm/dd/yyyy)		02/09/2000		11. PRESENT ADDRESS	
4. PLACE OF BIRTH		BAYBAY CITY, LEYTE		BARANGAY BIASONG, BAYBAY CITY	
5. SEX		<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female			
6. CIVIL STATUS		<input checked="" type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Annulled <input type="checkbox"/> Others, specify _____		12. ZIP CODE 6521	
7. CITIZENSHIP		FILIPINO		13. TEL. NO./CEL. NO. 09289233760	
8. HEIGHT (m)		142		14. PHILHEALTH NO. 13-025606588-7	
		9. WEIGHT (kg) 47		15. TIN 614-236-608-00000	
		10. BLOOD TYPE N/A		16. PAG-IBIG ID NO. 121306413464	
				17. EMAIL ADDRESS helenitable09@gmail.com	
18. SPOUSE'S SURNAME		N/A		18. NAME OF CHILD (Write full name and list all)	
FIRST NAME		N/A		DATE OF BIRTH (mm/dd/yyyy)	
MIDDLE NAME		N/A		N/A	
19. HIGHEST EDUCATIONAL ATTAINMENT (Please check and underline the specific)		[ ] Elementary (Grade _____ / Graduated) [ ] High School (1st, 2nd, 3rd, 4th, Graduated) <input checked="" type="checkbox"/> College (1st, 2nd, 3rd, 4th, <u>Graduated</u> ) Degree/Course: <u>BSAIP</u>			
20. CAREER SERVICE ELIGIBILITY		<input checked="" type="checkbox"/> Professional <input type="checkbox"/> Sub-Professional		<input type="checkbox"/> Others, Specify: _____	
21. WORK EXPERIENCE INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full)		DEPARTMENT / AGENCY / OFFICE / COMPANY / PROJECT (Write in full)	
From To				SALARY (Daily or Monthly)	
03/18/2024 07/18/2025		OFFICE CLERK		11,550.00	
02/12/2024 02/29/2024		DATA ENUMERATOR		17,000.00	
11/18/2022 08/03/2023		CUSTOMER SERVICE REPRESENTATIVE		18,000.00	
09/12/2022 09/26/2022		ENUMERATOR		4,750.00	
22. SPECIAL SKILLS (i.e. computer skills, typing, welding, plumbing, carpentry, auto mechanic, driving, et. al.)		Proficiency (Please check)		REMARKS	
		Highly Skilled Average Fair			
ORGANIZATIONAL SKILLS		/			
CUSTOMER SERVICE SKILLS		/			
COMMUNICATION SKILLS		/			
ACTIVE LISTENING		/			
GOOD TIME MANAGEMENT		/			
TEAMWORK		/			
GOOD WORK ETHIC		/			
23. RELEVANT TRAININGS SEMINAR/WORKSHOP ATTENDED (Write in full)		INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	
		From To		CONDUCTED/ SPONSORED BY (Write in full)	
N/A		N/A N/A		N/A	
I hereby declare that this Personal Data Sheet has been accomplished by me, and is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.					
24. COMMUNITY TAX CERTIFICATE NO. 02710317 ISSUED AT: BAYBAY CITY ISSUED ON (mm/dd/yyyy): 06/16/2025					
SIGNATURE: <u>[Signature]</u> DATE ACCOMPLISHED: (mm/dd/yyyy) <u>07/25/2025</u>					



**VISAYAS**  
STATE UNIVERSITY

**UNIVERSITY HEALTH SERVICE (UHS)**

Visca, Baybay City, Leyte, 6521-A PHILIPPINES

Telefax: (053) 565-0600; Local 1047

Email: [usher@vsu.edu.ph](mailto:usher@vsu.edu.ph)

Website: [www.vsu.edu.ph](http://www.vsu.edu.ph)

**MEDICAL CERTIFICATE  
(For Employment)**

This is to certify that I have seen and examined Mr./Ms. *Itable, Helen P.*  
25 / *female* that he/she is physically and/or medically ☒ fit or ☐ unfit to work.  
Physical Fitness Class: *A*  
Remarks: Apparently Well at the Time of Examination

**Class A:** Physically fit for any work  
**Class B:** Employable but with correctible defects  
**Class C:** Employed but with certain limitations  
and needing regular medication/check up  
**Class D:** Unfit to work.

Name & Signature of the Physician:

**MERRY CHRIST'L S. GUINOCOR, M.D.**

License No.: 111828

Date Examined: *07-22-2025*


**Vision:**  
**Mission:**

A globally competitive university for science, technology, and environmental conservation.  
Development of a highly competitive human resource, cutting-edge scientific knowledge  
and innovative technologies for sustainable communities and environment.


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FM-UHS-48  
v0 01-29-2021

No. *25-878*



 <div>Republic of the Philippines Philippine Health Insurance Corporation PHILHEALTH AGENTS RECEIPT (PAR)</div>		PAYOR'S COPY
		PAR NUMBER
		327301396
NAME	ITABLE, HELEN PALCO	DATE
		07/21/2025
AMOUNT RECEIVED	1,500.00	AGENT'S SIGNATURE
		LGU BAYBAY
VALIDATION BOX		
1302-5606-5887		
PIN	ITABLE, HELEN PALCO	
NAME	VOLUNTARY	
MEMBER TYPE	JULY 2025-SEPTEMBER 2025	
APPLICABLE PERIOD	07/21/2025	
AMOUNT	1,500.00	
VALIDATION DATE	327301396	
PAR NUMBER		
<div>Bawat Filipino, Miyembro Bawat Miyembro, Protektado Kalusugan ng Lahat, Segurado</div>		

BIR FORM 0016 (DECEMBER, 2014)

COMMUNITY TAX CERTIFICATE		INDIVIDUAL		CCI2023 02710317	
YEAR 2025	PLACE OF ISSUE (City /Mun./ Prov.) BAGUIO CITY	DATE ISSUED 6/18/25		TAXPAYER'S COPY	
NAME (SURNAME) ITABUE (FIRST) HELEN (MIDDLE) PALCO		TIN (if Any)			
ADDRESS Brgy. Biazon, Baguio City		SEX: <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE		HEIGHT 5'	
CITIZENSHIP PH	ICR NO. (if an Alien)	PLACE OF BIRTH BAGUIO CITY		DATE OF BIRTH 2/05/2000	
CIVIL STATUS <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/ Widower/ Legally Separated	WEIGHT 86		TAXABLE AMOUNT		COMMUNITY TAX DUE
PROFESSION / OCCUPATION / BUSINESS					
A. BASIC COMMUNITY TAX (P5.00) Voluntary or Exempted (P 1.00)				P 5	
B. ADDITIONAL COMMUNITY TAX (tax not to exceed P5,000.00)					
1. GROSS RECEIPTS OR EARNINGS DERIVED FROM BUSINESS DURING THE PRECEDING YEAR (P1.00 for every P 1,000.00)				P 15	
2. SALARIES OR GROSS RECEIPT OR EARNINGS DERIVED FROM EXERCISE OF PROFESSION OR PURSUIT OF ANY OCCUPATION (P1.00 for every P 1,000)					
3. INCOME FROM REAL PROPERTY (P1.00 for every P 1,000)					
<b>Right Thumb Print</b> 	TAXPAYER'S SIGNATURE		TOTAL		P 20.-
	HELEN P. ITABUE		INTEREST		
	ALBERTA BUENA A. MANATAD City Treasurer		TOTAL AMOUNT PAID		P 20.-
				(in words): TWENTY PESOS	

DOP: 03.24.2023