

Republic of the Philippines University of the Southeastern Philippines Bo. Obrero, Davao City

Obligation Request Slip

Payee:	No.:			
Office:				
Address:				
Responsible Center	Particulars	P.P.A	Acc. Code	Amount
		Total:		
A. Certified		B. Certified		
Charges to appropriation necessary, lawful		Allotment available and obligated		
And under my direct supervision		for the purpose as indicated above		
Supporting d	ocuments valid, proper and legal			
Signature:		Signature:		
Printed Name:	Melanie C. Pagkaliwanagan	Printed Name:	Hyacinth Joy G. Robles	
Position:	Executive Assistant II	Position:	Administrative Officer VI	
Head, Accounting Unit / Authorized Representative		Agency Head/ Authorized Representative		
Date:		Date:		

Alternate Signatory of Box A: **Jeane Ann A. Argami**Admin. AideVI