								TOT MID2				
	OBLIGAT	Serial No.	01-1	01101-2024-								
OBLIGATION REQUEST AND STATUS  TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY - 10  Entity Name												
							ter:	101101				
Payee												
Office			-			, , , , , , , , , , , , , , , , , , , ,						
Address	Cagayan de C	)ro City										
Responsibi Center	lity	Particulars				UACS Obj	ect Code	Amount				
16-009-0300 TESDA Regio Office X	onal							vvvvvvv				
TOTAL								0.00				
A. Certified: Charges to appropriation/allotment are necessary, lawful and under my direct supervision and Supporting documents valid, proper and legal  B. Certified: Allotment available and obligated for the purpose/ adjustment necessary as indicated above												
Signature				Signature	:							
Printed Nam	TOTAL !	KAYE KASHKA I. ABROGAR			Printed Name :			NERJIL MAE T. ACIERTO				
Position		Accountant IV/Acting FASD Chief Positi				: AO V/Budget Officer						
Date	Head, Requestin	ntative	Date	:	ead, Requesting	Office/Author	rized Representative					
C.	C. STATUS OF OBLIGATION											
	Reference				Amo	unt						
Date	Particulars	ORS/JEV/Check/ ADA/TRA No.	Obligation	Payable			t Yet Due	Balance Due and Demandable				
			(a)	(b)	(c	)	(a-b)	(d-c)				
			P0.00	P0.00	РО.	00	0.00					

OBLIGATION REQUEST AND STATUS  TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY - 10  Entity Name							Serial No. 01-1		01-10	04102-2024-		
							Date:					
							Fund (	Cluster:	104102			
Payee												
Office												
Address												
Responsibili Center	ity	Particulars				MFO/PAP UACS		UACS	Object Code		Amount	
16-009-03000 TESDA Regio Office X		1003									VVVVVVV	
					TOTAL				0.00		0.00	
A. Certified: Charges to appropriation/allotment are necessary, lawful and under my direct supervision and Supporting documents valid, proper and legal  Signature:  Signature												
Printed Name : KAYE KASHKA I. ABROGA			Printed Name				:	NERJIL MAE T. ACIERTO				0
		: IV/Acting FASD Chief			Position :			AO V/Budget Officer				
Head, Requesting Office/Authorized Represen  Date :			rtative		Date		:	Head, Requesting Office/Authorized R				esentative
C.			STATUS	OF C	BLIGATION							
	Reference Amount											
Date	Particulars	ORS/JEV/Check/ ADA/TRA No.	Obligation	n	n Payable		Payn	nent	AND DESCRIPTION OF THE PARTY OF			Due and mandable
			(a)		(b)			(a-k				(d-c)
			P0.00		P0.00		P0.	00	0.00			