

REPORT OF CHECKS ISSUED

Period Covered: FEBRUARY 2017

Entity Name : PANGHULO NATIONAL HIGH SCHOOL

Fund Cluster : 01101101

Bank Name/Account No. : LBP 2065-9003-38

Report No.: _____

Sheet No.: _____

Check		DV/Payroll No.	ORS/BURS No.	Responsibility Center Code	Payee	UACS Object Code	Nature of Payment	Amount
Date	Serial No.							
2/6/2017	81898	2017-02-0025	01-101101-2017-02-00025	070010913060	Julita Mendoza	5010101001	Salaries and Wages	6,020.19
2/9/2017	81899	2017-02-0026	01-101101-2017-02-00023	070010913060	PHILIPPINE HEALTH INSURANCE CORPORATION	5010303001	PhilHealth Contributions	39,650.00
	81900	2017-02-0027	01-101101-2017-02-00027	070010913060	LETICIA A. DE LEON	5010101001	Salaries and Wages	8,421.51
	81901	2017-02-0028	01-101101-2017-02-00028	070010913060	MAXINNE PATRICE T. PEREZ	5010101001	Salaries and Wages	8,290.21
2/21/2017	81902	2017-02-0034	01-101101-2017-02-00034	070010913060	DEPED - NCR SALARY ACCOUNT	5010101001	Due to Regional Offices	514,073.16
2/27/2017	81903	2017-02-0044	01-101101-2017-02-00044	070010913060	HOME DEVELOPMENT MUTUAL FUND	5010302001	Pag-IBIG Contributions	400.00
	81904	2017-02-0045	01-101101-2017-02-00045	070010913060	GOVERNMENT SERVICE INSURANCE SYSTEM	5010304001	ECIP	3,731.60
	81905	2017-02-0046	01-101101-2017-02-00046	070010913060	GOVERNMENT SERVICE INSURANCE SYSTEM	5010301000	RLIP	4,708.80
							Total:	585,295.47

CERTIFICATION

I hereby certify on my official oath that this Report of Checks Issued in 1 sheet(s) is a full, true and correct statement of all checks issued by me during the period stated above for which Check Nos. 81898 to 81905 inclusive, were actually issued by me in payment for obligations shown in the attached disbursement vouchers/payroll.

SHYLACK L. RAMOSO

Disbursig Officer II

2/28/2017

Date