

| | | | |
|---------------------------|--|--|--------------|
| *****nothing follows***** | | | |
| TOTAL: | | | P 110,900.00 |

(17) 5/17

PLACE OF DELIVERY:
 TIME/PERIOD OF DELIVERY:
 PURPOSE/REMARKS:

CLARIN COMMUNITY HOSPITAL
 Five to Seven Days upon Receipt of Approved P.O.
 To Purchase R&M - MACHINERY & EQUIPMENT for Hospital Use.

APPROVED BY AUTHORITY OF THE GOVERNOR

Requested By:

Cash Availability

Approved By:

SIGNATURE:
 PRINTED NAME:
 DESIGNATION:

lmy
 NOEL G. MANALO MD, RN, MPA
 - CHIEF OF HOSPITAL

[Signature]
 EUSTAQUIO A. SOCORIN
 PROVINCIAL TREASURER

[Signature]
 ASTERIA G. CABERTE
 PROVINCIAL ADMINISTRATOR
 ERICO ARISTOTLE C. AUMENTADO
 GOVERNOR

PROVINCIAL BUDGET OFFICE
 PROVINCE OF BOHOL

CONTROL NO. 219 REC'D BY [Signature] DATE: 5/16/23

MARK NO. 0349 VALID UNTIL: 12/31/23

EXPENSE CODE 442206 50213050-01 AMOUNT 110,900.00

DATE SOURCE 2022-019 DATE 5/10/23

[Signature]
 PETER JESS M. ALONSO

2022-167 DATE: 5/29/23

PROVINCIAL BUDGET OFFICE

2022-107

AMOUNT 110,900.00