

PURCHASE REQUEST

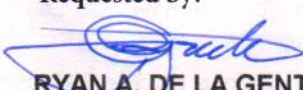
Entity Name: _____ Fund Cluster: _____

Office/Section: <u>UCT/PPD</u>		PR No.: <u>2021-01-0100</u>	Date: <u>January 18, 2021</u>		
		Responsibility Center Code: _____			
Stock/ Property No.	Unit	Item Description	Quantity	Unit Cost	Total Cost
1	unit	Other Supplies: 9 Doors Double Lock Steel Cabinet, gray color ***Nothing Follows*** <div style="border: 1px solid black; padding: 5px; width: fit-content;"> FINANCE MANAGEMENT DIVISION FUNDS AVAILABLE BUDGET SECTION: <u> </u> DATE: <u> </u> REF: <u>320104200003001 (UCT-UC) 02-7070-11-25 (A) 5-70-7020</u> <u>50703990-01</u> </div>	3	11,800.00	35,400.00
			TOTAL		35,400.00

OSWD FIELD OFFICE V
 RISK & REWARDS COMMITTEE
2021-01-0020
 APPROVED BY: _____ TIME: _____
 REC'D BY: _____

Purpose:

For the use of Unconditional Cash Transfer Program Implementation

Requested by:

Signature: RYAN A. DE LA GENTE
Printed Name: CAO/OIG-PPD CHIEF
Designation: _____

Approved by:

Signature: MA. EVELYN B. MACAPOBRE, CESO III
Printed Name: _____
Designation: REGIONAL DIRECTOR