



STATEMENT OF OBLIGATIONS, DISBURSEMENTS, LIQUIDATIONS AND BALANCES for INTER-AGENCY FUND TRANSFERS
 (for Source Agency use only)
 As at the Quarter of Ending September 30, 2021


Department : Department of Health
 Agency/Entity : REGION I MEDICAL CENTER
 Operating Unit :
 Organization code : 13-001-14-00018
 Fund Cluster : 01-Regular Agency Fund

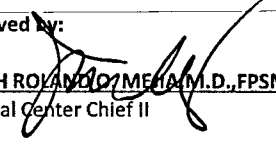
x	Current Year Appropriations
	Supplemental Appropriations
	Continuing Appropriations

Implementing Agencies and Projects	Obligations						Disbursements (Funds Transferred To)					Liquidations				Unpaid Obligations	Unliquidated Fund Transfers			
	Obligation Request and Status		1st Quarter Ending March 31	2nd Quarter Ending June 30	3rd Quarter Ending Sept. 30	4th Quarter Ending Dec. 31	Total	1st Quarter Ending March 31	2nd Quarter Ending June 30	3rd Quarter Ending Sept. 30	4th Quarter Ending Dec. 31	Total	1st Quarter Ending March 31	2nd Quarter Ending June 30	3rd Quarter Ending Sept. 30			4th Quarter Ending Dec. 31	Total	
	Number	Date																		
1	2	3	4	5	6	7	8=(4+5+6+7)	9	10	11	12	13=(9+10+11+12)	14	15	16	17	18=(14+15+16+17)	19=(8-13)	20=(13-18)	
Department of Health Office of the Secretary Region I Medical Center			NONE	NONE	NONE			NONE	NONE	NONE			NONE	NONE	NONE					
Grand Total																				

Certified Correct:

Nariyn R. Severo, MDM
 Supervising Adm. Officer -Budget Officer
 Date: Oct. 8,2021

Certified Correct:

Loewelyn D. Barba, CPA, MBA
 Accountant IV
 Date: Oct. 8,2021

Recommending Approval:

Julie N. Malubag, CPA, MDM
 Financial & Management Officer II
 Date: Oct. 8,2021

Approved by:

JOSEPH ROMAN, M.D., FPSMS, MBAH, MPA, DHSM, DCDM, CESE
 Medical Center Chief II
 Date: Oct. 8,2021