



Republic of the Philippines
OFFICE OF THE CHIEF MINISTER
Bangsamoro Autonomous Region in Muslim Mindanao
 BARMM Complex, Cotabato City

LIQUIDATION REPORT

Period Covered _____

Serial No.: _____

Date: _____

Entity Name : _____

Responsibility Center Code: _____

Fund Cluster : _____

PARTICULARS	AMOUNT

TOTAL AMOUNT SPENT	→
AMOUNT OF CASH ADVANCE PER DV NO. _____ DTD. _____	→
AMOUNT REFUNDED PER OR NO. _____ DTD. _____	→
AMOUNT TO BE REIMBURSED	→

<p>A Certified: Correctness of the above data</p> <p style="text-align: center;">_____ Signature over Printed Name Claimant</p> <p>Date: _____</p>	<p>B Certified: Purpose of travel / cash advance duly accomplished</p> <p style="text-align: center;">_____ Signature over Printed Name Immediate Supervisor</p> <p>Date: _____</p>	<p>C Certified: Supporting documents complete and proper</p> <p style="text-align: center;"><u>ANALEE C. BIRUAR</u> Signature over Printed Name Head, Accounting Division Unit</p> <p>JEV No.: _____</p> <p>Date: _____</p>
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