

Republic of the Philippines

Department of Education Region V SCHOOLS DIVISION OF SORSOGON

September 5, 2023

DIVISION MEMORANDUM No. 183, s.2023

REITERATION COA CIRCULAR 2023-004 (Prescribing the Updated Documentary Requirements for Common Government Transactions, amending COA Circular No. 2012-001 dated June 14, 2012)

To: Assistant Schools Division Superintendent Chiefs - CID, SGOD Public Elementary and Secondary School Heads All Functional Divisions/Section/Unit Heads All Others Concerned

- In the interest of the service and to institutionalize compliance with the
 existing rules and regulations of the Commission on Audit (COA), specifically
 COA Circular No. 2023-004, this office restates the list of revised documentary
 requirements for Common Government Transactions.
- All program implementers and division personnel must ensure that the accompanying paperwork for every transaction complies with the established documentation standards in order to process claims.
- 3. Enclosed is a copy of the above mentioned COA circular, and other forms to be used in compliance with said circular.
- 4. Immediate dissemination and compliance to this Memorandum is desired.

WILLIAM & GANDO, CESO VI Schools Division Superintendent

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REPUBLIC OF THE PHILIPPINES COMMISSION ON AUDIT COMMONWEALTH AVENUE, QUEZON CITY



CIRCULAR

No. : 2023-004

Date : JUN 1 4 2023

TO

All Heads of the National Government Agencies (NGAs) including State Universities and Colleges (SUCs); Heads of Government Corporations (GCs) classified as Non-Government Business Enterprises/Non-Commercial Public Sector Entities; Heads of Local Government Units (LGUs); Heads of Finance/Comptrollership/Financial Management Services; Chief Accountants/Heads of Accounting Units; Commission on Audit (COA) Assistant Commissioners, Directors, Auditors; and All Others

Concerned

SUBJECT

Prescribing the Updated Documentary Requirements for Common Government Transactions, amending COA Circular No. 2012-001

dated June 14, 2012

1.0 RATIONALE

The Permanent Review Committee (PRC) created under COA Office Order No. 2018-246 dated March 27, 2018 was tasked to review auditing policies, rules, standards and regulations in line with Goal A.2.d of the 2016-2022 COA Strategic Plan.

The PRC solicited from various agencies the COA rules and regulations that need to be updated/revised. COA Circular No. 2012-001 issued on June 14, 2012 had the most number of recommended revisions/updates.

Pursuant to the rule-making function of this Commission, as provided under Section 2(2) of Article IX-D of the 1987 Philippine Constitution and Section 25(4), Chapter 2, Title I of Presidential Decree (PD) No. 1445 or the Government Auditing Code of the Philippines, this Circular is issued to prescribe the updated documentary requirements for common government transactions to facilitate disbursement, liquidation and audit thereof.

2.0 COVERAGE/LIMITATION

- 2.1. This Circular updates only the documentary requirements for disbursements relating to the following common government transactions chargeable against the funds of all NGAs, GCs and LGUs:
 - a) Cash Advances;
 - b) Fund Transfers to Non-Government Organizations/ People's Organizations/Civil Society Organizations (NGOs/POs/CSOs);
 - c) Fund Transfers to Implementing Agencies;
 - d) Salary;
 - e) Allowances, Honoraria and Other Forms of Compensation;
 - f) Other Expenditures;
 - g) Extraordinary and Miscellaneous Expenses;
 - h) Prisoner's Subsistence Allowance;
 - Procurement of Goods, Consultancy and Infrastructure Projects (Regardless of Mode of Procurement);
 - j) Cultural and Athletic Activities;
 - k) Human Resource Development and Training Program;
 - 1) Financial Expenses;
 - m) Legal Retainer's Fee; and
 - n) Road Right-of-Way (ROW) / Real Property.
- 2.2. The updated documentary requirements are made generic and not dependent on related laws, rules and regulations which are amended from time to time.

3.0 GUIDELINES

- 3.1. One of the general requirements for disbursements is that all claims against government funds shall be supported with complete documentation¹ that shall establish the integrity² of the claim.
- 3.2. The updated documentary requirements for common government transactions are listed in Annex A. Government agencies may, however, impose additional documentary requirements which are peculiar to their operations.
- 3.3. The submission of complete supporting documents enumerated under each type of transaction does not preclude reasonable questions on the funding, legality, regularity, necessity or economy of the expenditure or transaction, among others, and such questions may be raised by any of the signatories to the transaction.³

4.0 REPEALING CLAUSE

All provisions of COA Circular No. 2012-001 dated June 14, 2012 which are not inconsistent herewith shall remain in full force and effect.

² Refers to validity, authority, completeness, and accuracy.

¹ Section 4.6, PD No. 1445.

³ Item 3, 1st paragraph of COA Circular No. 92 3 9 dated November 3, 1992.

EFFECTIVITY 5.0

The Circular shall take effect 15 days after its publication in a newspaper of general circulation.

GAMALIEL A. CORDOBA Chairperson

ROLAND CAFÉ PONDOC

Commissioner

Commissioner

ANNEX A

Updated Documentary Requirements for Common Government Transactions



As prescribed under COA
Circular No. 2023 - 004
dated JUN 1 4 2023

COMMISSION ON AUDIT Commonwealth Avenue, Quezon City, Philippines

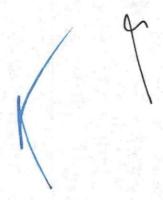
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Updated Documentary Requirements For Common Government Transactions

| 1.0 | Cash Advances | | | | | |
|-----|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| | 1.1 | Granting of Cash Advances | | | | |
| | For a | l types of cash advances except for travel cash advances | | | | |
| | 0 | Authority of the accountable officer issued by the Head of the Agency or his duly authorized representative indicating the maximum accountability and purpose of cash advance (for initial cash advance) | | | | |
| | | Certification from the Chief Accountant that previous cash advances have been fully liquidated and accounted for in the books | | | | |
| | ٥ | and the state of t | | | | |
| | <u>Addi</u> | onal Documentary Requirements for Specific Transactions | | | | |
| | 1.1.1 | Payroll Funds for Salaries, Allowances, Honoraria and Othe Similar Expenses | | | | |
| | | Approved payroll or list of payees indicating their net pay Approved authority (presidential directive or legislative enactment) of legal basis to pay allowances/salaries/honoraria/fringe benefits | | | | |
| | 1.1.2 | Petty Cash Fund (PCF) | | | | |
| | | Approved estimate of petty expenses for one month (initial set-up) | | | | |
| | 1.1.3 | Field/Activity Current Operating Expenses (COE) | | | | |
| | | Approved Budget for COE of the agency field office or agenc activity in the field | | | | |
| | 1.1.4 | Traveling Expenses | | | | |
| | | 1.1.4.1 Local Travel | | | | |
| | | □ Duly approved Office Order/Travel Order □ Duly approved Itinerary of Travel □ Certification from the Chief Accountant that previous cash advance have been fully liquidated and accounted for in the books | | | | |

| | a | Quotation of plane fare for similar dates, from at least three airline companies/travel agencies or its equivalent. In case of less than three quotations, a certification by the claimant attesting to such circumstance, signed by his/her supervisor | | | |
|-------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | | Letter of invitation of the host/sponsoring agency/organization | | | |
| | 1.1.4.2 | 2 Foreign Travel | | | |
| | 0 | Duly approved Office Order/Travel Order | | | |
| | | Duly approved Itinerary of Travel | | | |
| | | Certification from the Chief Accountant that previous cash advances | | | |
| | T. 4. | have been fully liquidated and accounted for in the books | | | |
| | | Letter of invitation of the host/sponsoring country/agency/organization | | | |
| | | Flight itinerary issued by the airline ticketing office/travel agency | | | |
| | 0 | Quotation of plane fare for similar dates, from at least three airline companies/travel agencies or its equivalent. In case of less than three quotations, a certification by the claimant attesting to such circumstance, signed by his/her supervisor | | | |
| | | Where applicable, authority to claim representation expenses | | | |
| | In case | e of seminar/training: Acceptance of nominee/s as participant/s (issued by the host country) | | | |
| | | Programme Agenda and Logistics Information | | | |
| 1.2 | Liqui | dation of Cash Advances | | | |
| 1.2.1 | Payroll Funds for Salaries, Allowances, Honoraria and Other Similar Expenses | | | | |
| | | Report of Cash Disbursements (RCDisb) certified correct by the accountable officer | | | |
| | | Approved payrolls/vouchers ¹ duly acknowledged/signed by the payee/s | | | |
| | | Duly verified/approved accomplishment report, in case of payment of personnel under the "job order" status | | | |
| | | Official Receipt (OR)/printed electronic Official Receipt (eOR) ² /Acknowledgement Receipt (AR) or equivalent in case of refund for unclaimed Salaries, Allowances, Honoraria and Other Similar Expenses | | | |
| | 0 | Authority from the claimant and identification documents, if claimed by a person other than the payee | | | |

¹ The Daily Time Record (DTR) for payroll cash advance are no longer required considering that the certification by the authorized official that services (usually by the HRMO) was duly rendered on Box A of Payroll form would be sufficient.

² Certified by the claimant as a duplicate copy of the original

1.2.2 Petty Cash Fund

| | Report on Paid Petty Cash Vouchers (RPPCV) |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Petty Cash Vouchers (PCVs) duly accomplished, signed and approved |
| | Approved purchase request with certificate of Emergency Purchase, if necessary |
| | Bills, receipts, sales invoices |
| ā | Certification of Expense not Requiring Receipt (CERR) (for expenses |
| | amounting to P300 or less) or Reimbursement Expense Receipts (RER) (for expenses amounting to more than P300 but not exceeding P1,000), pursuant to COA Circular No. 2017-001 dated June 19, 2017, as amended by COA Circular No. 2021-001 dated June 24, 2021, or other amount that may be prescribed in the future |
| | Inspection and Acceptance Report (IAR) or Certificate of Inspection and Acceptance |
| | Pre-/Post-Repair Inspection Report |
| | Waste Materials Report (WMR) in case of replacement/repair |
| ā | Approved trip ticket, for gasoline/fuel expenses, together with parking |
| | and toll fee receipts, if any (applicable for government vehicles only) |
| • | Canvass from at least three suppliers for purchases as prescribed (involving P2,000 and above or other amount that may be prescribed in the future), except for purchases made while on official travel |
| | Summary/Abstract of Canvass |
| | OR/eOR/AR or equivalent in case of refund of PCF |
| | Inventory Custodian Slip (ICS) for semi-expendable items |
| For | meals and snacks charged to PCF: |
| ۰ | Notice of meeting with agenda/meeting's purpose |
| | Minutes of Meeting |
| | Attendance Sheet |
| 1.2.3 Field | d/Activity Current Operating Expenses |
| 0 | Same requirements as those for salaries, petty operating expenses, other personnel services, and maintenance and other operating expenses depending on the nature of expenses incurred. |
| 1.2.4 Trav | veling Expenses |
| | Liquidation Report |
| | Approved Certificate of Travel Completed |
| | Approved Revised Itinerary of Travel, if the previously approved |
| | itinerary was not followed |
| | Copy of previously approved Itinerary of travel |
| | Copy of Office Order and the Supplemental Office Order or any proof supporting the change of schedule |
| | Certificate of Appearance or Attendance or in the absence thereof, |
| | photocopy of the received copy of Memo Transmittal of Back to |
| | Office Report/Narrative Report on trip undertaken/Report on |

Participation addressed to the agency head. The report, duly noted by the agency head or his authorized representative, shall contain, among others, the following information:

- Highlights of the training/activity;
- Pictures preferably dated; 0
- Plan of action for knowledge sharing; and 0
- Recommendations
- OR/eOR³/AR or equivalent in case of refund of excess cash advance

Additional Documentary Requirements

1.2.4.1 Local Travel

- Paper/electronic plane, boat or bus/train tickets, terminal fee receipts, paper/electronic boarding passes or a passenger manifest certified by the concerned airline or shipping company
- Certification by the Head of Agency as to the absolute necessity of the expenses together with the corresponding bills or receipts, if the expenses incurred for the official travel exceeded the prescribed rate per day (certification or affidavit of loss shall not be considered as an appropriate replacement for the required hotel/lodging bills and receipts)
- OR/eOR or CERR (for expenses amounting to P300 or less) or RER (for expenses amounting to more than P300 but not exceeding P1,000), pursuant to COA Circular No. 2017-001 dated June 19, 2017, as amended by COA Circular No. 2021-001 dated June 24, 2021, or other amount that may be prescribed in the future. In case of payment of toll fees,4 the CERR/RER shall be supported with the toll fee rates.
- Hotel room/lodging bills with official receipts in the case of official travel to places within 50-kilometer radius from the last city or municipality covered by Metro Manila Area, if the travel allowances being claimed include hotel room/lodging

1.2.4.2 Foreign Travel

Paper/electronic plane, boat or bus/train tickets, terminal fee receipts, paper/electronic boarding passes or a passenger manifest certified by the concerned airline or shipping company. In the absence thereof other documents such as, but not limited to, a certified true copy of the passport showing the dates of entry and exit, duly stamped by the Immigration Office of the country of destination as indicated in the approved travel authority and itinerary of travel; or a passenger manifest certified by the concerned airline or shipping company

³ Electronic Official Receipts (eORs) include those issued by ride hailing applications (e.g. grab uber, angkas etc.) and paid through electronic means (e.g. GCash, Grab Pay, Paya Maya etc.). This must be printed and applies to all transactions where an eOR is used as proof of payment.

The printed copies of eORs, or the equivalent may be used as proof of payments by government personnel of toll fees collected by operators through Radio Frequency Identification (RFID).

| | | 1. N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |
|-----|-----|-------------------------------------------------------------------------------------------------------------------------------------|
| | | For reimbursement of actual travel expenses in excess of the prescribed rate: |
| | | o Approval by the President |
| | | Certification from the Head of the Agency that it is absolutely necessary |
| | | Hotel room with official receipts (certification or affidavit of |
| | | loss shall not be considered as an appropriate replacement |
| | | for the required bills and receipts) |
| | | Dill / 1 . 6 |
| | | approved by the President or authorized officials |
| | | |
| 2.0 | Fun | d Transfers to Non-Government Organization/People's Organizations/ I Society Organizations (NGOs/POs/CSOs) |
| | 2.1 | Transfer of Funds |
| | 0 | Duly approved Schedule of Fund Release to NGO/PO/CSO |
| | 0 | Approved Summary of Budgetary Requirements detailing the items of |
| | | expenditure/ disbursement to be incurred in the program/project |
| | | Performance security for infrastructure project |
| | | Copy of signed Memorandum of Agreement (MOA) executed by and between the Government Agency and the NGO/PO/CSO |
| | | Certificate of Registration with the concerned government agencies, i.e. SEC, CDA or DOLE |
| | | Document showing that the NGO/PO/CSO has equity equivalent to 20% |
| | _ | of the total project cost, which shall be in the form of labor, land for the |
| | | project site, facilities, equipment and the like, to be used in the project |
| | | Copy of the OR/eOR/AR or equivalent issued by the NGOs/POs/CSOs to |
| | _ | the Source Agency acknowledging receipt of funds transferred |
| | | Certification from the Accountant of the source agency that the previous |
| | - | fund transfer had been liquidated and accounted for in the books (staggered release) |
| | 2.2 | Liquidation of Funds Released |
| | | Report of Advice to Debit Account Issued and/or Report of Cash |
| | | Disbursements |
| | | Interim or Final Fund Utilization Report, on the previous release of fund |
| | | (for staggered release) indicating the summary of expenses and the status |
| | | report of accomplishments, certified by the Chief Accountant and approved |
| | | by the President/Chairperson of the NGO/PO/CSO |
| | | OR/eOR/AR or equivalent issued by the granting Government Agency acknowledging return by NGO/PO/CSO of any unutilized/excess amount |
| | | of cash advance, including interest, if any |
| | | Inspection report and certificate of project completion issued by the |
| | _ | Government Agency's authorized representative |
| | 0 | List of equipment/vehicles procured by the NGO/PO/CSO out of the project |
| | - | funds indicating its brief description, date acquired, acquisition cost and |
| | | final disposition |
| | | mini disposition |

| 0 | Warranty for procured equipment and projects |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Pictures of implemented projects List of beneficiaries showing proof of identification (with address and contact number) with their signatures signifying their acceptance/ |
| • | acknowledgement of the project/funds/goods/services received Proof of verification by the Government Agency official of the validity of the documents submitted by the NGO/PO/CSO |
| 0 | In case of dissolution of the recipient NGO/PO/CSO, in addition to the OR/eOR/AR or equivalent acknowledging return of unutilized amount, copy of the vouchers paid by the NGO/PO/CSO |
| Fund | d Transfers to Implementing Agency |
| 3.1 | Transfer of Fund |
| Sou | rce Agency |
| 0 | Copy of duly signed MOA/Trust Agreement or its equivalent |
| | Copy of Approved Program of Work (for infrastructure project) |
| | Approved Project Expenditures or Estimated Expenses indicating the project objective and expected output (for projects other than infrastructure) |
| | For GCs/GFIs, Board Resolution ratifying the MOA or its equivalent in case |
| | of transfers not incorporated in the Corporate Operating Budget and/or beyond the signing authority of the Agency Head |
| | For local government units (LGUs), authorization by local Sanggunian for the Local Chief Executive to enter into contract in case of the following: o In the case of a reenacted budget: |
| | For the new contracts entered into by the local chief executive for contractual obligations included in the previous year's annual and supplemental budget |
| | o In the case of the regularly enacted budget: |
| | For projects described in generic terms, such as infrastructure projects, inter-municipal waterworks, drainage and sewerage, flood control, irrigation system projects, reclamation projects, or roads and bridges. |
| | For purchase of goods and services which are neither specified nor encompassed within the regular personnel services and maintenance and other operating expenses |
| | Certification by the Chief Accountant that funds previously transferred to the Implementing Agency (IA) have been liquidated and accounted for in the books |
| | Copy of the OR/eOR/AR or equivalent issued by the IA to the Source |
| | Agency acknowledging receipt of funds transferred (for post-audit activities) |
| | OR/eOR/AR or equivalent from IA, if transfer of funds is thru List of Due and Demandable Accounts Payable – Advice to Debit Accounts (LDDAP- |
| 0 | ADA) Acknowledgement Receipt for those recipients of research fund |

3.0

Copy of the TCT of the land where the project will be built and a certification from the implementing agency that the site is clear from impediments, e.g. informal settlers, legal claims of property ownership by other claimants, mountain obstruction, right of way Liquidation of Funds Transferred 3.2 Implementing Agency Copy of duly signed MOA/Trust Agreement/Terms of Reference or its equivalent Original copy of the Report of Checks Issued/Report of Advice to Debit Account Issued and/or Report of Cash Disbursements and supporting documents duly Certified Correct by the Chief Accountant and approved by the Agency Head Copy of OR/eOR/AR or equivalent issued by the Source Agency evidencing refund of unexpended/unutilized balance of fund transfer Status of Project/Program/Activity Accomplishment Inspection and Acceptance Report of research outputs of Completed (Research) Projects, approved by the Agency Head and duly acknowledged by the SA. Source Agency Copies of Approved Journal Entry Vouchers of all transactions charged from the fund drawn by the Chief Accountant of the IA Duplicate copy of the Report of Checks Issued/Report of Advice to Debit Account Issued and/or Report of Cash Disbursements and supporting documents duly certified correct by the Chief Accountant and approved by the Agency Head, stamped "received" by the Auditor of the IA Copy of OR/eOR/AR or equivalent upon receipt of funds transferred Copy of Notices of Disallowance and subsequent audit decisions issued, if Copy of OR/eOR/AR or equivalent issued for the refund of unexpended/unutilized balance of fund transferred 3.3 From Trust Fund to the General Fund for unspent balance/excess amount Implementing Agency Report of Receipt, Disbursement and Fund Balance certified by the Chief Accountant and approved by the Head of the Agency Contract, which may be a MOA, Trust Agreement or Memorandum of Understanding (MoU) governing the utilization of funds and disposition of any balance thereof after completion of the purpose of the funds transferred Letter of IA to Source Agency to transfer the unexpended balance to the General Fund duly approved by the Source Agency, if the disposition thereof has not been provided in the MOA, Trust Agreement or MoU

4.0 Salary

4.1 Individual Claims

4.1.1 First Salary

| For Reg | ular Emp | loyees |
|---------|----------|--------|
|---------|----------|--------|

| | Certificate of Appointment duly attested by the Civil Service |
|------|--------------------------------------------------------------------------------------------------------|
| | Commission (CSC) or its equivalent |
| | Assignment/Re-Assignment order, if applicable |
| | Certified copy of Oath of Office |
| | Certificate of Assumption |
| | Statement of Assets, Liabilities and Net Worth |
| | Approved Daily Time Record (DTR) |
| | Bureau of Internal Revenue (BIR) withholding certificate |
| | Payroll Information on New Employee (PINE) or any equivalent |
| | document |
| | Authority from the claimant and identification documents, if claimed by person other than the payee |
| Add | itional Requirements for transferee (from one government agency to |
| anot | |
| | Clearance from money, property and legal accountabilities from the |
| _ | previous office |
| | Certified copy of paid disbursement voucher of last salary received |
| | and/or Certification by the Chief Accountant for the breakdown of |
| | last salary received and remittance of statutory deductions from |
| | previous office |
| | Certificate of leave credits |
| | Service Records |
| | BIR Certificate of Compensation Payment/Tax Withheld |
| | Approved/paid Home Development Mutual Fund (HDMF) and |
| | PhilHealth Forms |
| For | Contract of Service and Job Order Workers |
| | Approved Contract for Contract of Service and Job Order Workers |
| 0 | Certificate of Assumption |
| 0 | Approved DTR |
| | BIR withholding certificate |
| 4.1. | 2 Salary (if Deleted from the Payroll) |
| П | Approved DTR |
| 0 | Notice of Assumption |
| - | Approved Application for Leave, and Medical Certificate if on sick |
| | leave for five days or more and clearance if on leave for 30 days or |
| | more/ |
| | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | |

4.1.3 Salary of Casual/Contractual Personnel, Charged to Personnel Services For accredited agencies by the CSC (for first claim) Certified copy of the pertinent contract/appointment Copy of the Report of Personnel Action (ROPA) of the pertinent contract/appointment marked received by the CSC For other agencies (for first claim) Certified copy of the pertinent contract/appointment marked received by the CSC Certification by the Local Chief Executive (LCE), in case of LGUs, that the employment/hiring is still within the Personal Services (PS) Certification by the LCE/Personnel Officer that the activities and services cannot be provided by regular or permanent personnel of the agency (for first claim) Duly Approved Accomplishment Report Approved DTR Certificate of Assumption of Duty for the first salary 4.1.4 Salary Differentials due to Promotion and/or Step Increment Due to Promotion: o Certified copy of Approved Appointment o Certificate of Assumption Notice of Salary Adjustment (NOSA), for step increment/salary increase Approved DTR or certification that the employee has not incurred leave without pay Certification by the LCE, in case of LGUs, that the promotion/step increment is still within the PS limitation 4.1.5 Last Salary Clearance from money, property and legal accountabilities Approved DTR Authority to deduct accountabilities, if any Certification of available leave credits 4.1.6 Salary due to Heirs of Deceased Employee Death Certificate issued by the Philippine Statistics Authority (PSA) or Court Declaration in case of presumptive death or any evidence of circumstances of death, whichever is applicable. Marriage Certificate issued by PSA, if applicable/ Birth Certificate of surviving legal heirs issued by PSA Waiver of right of children 18 years and above, if applicable Designation/of next-of-kin -

 Affidavit of two disinterested parties that the deceased is survived by legitimate and illegitimate children (if any), natural, adopted or children of prior marriage

| | 4.1.7 | Salary during Maternity Leave |
|------|--------------|---------------------------------------------------------------------------------------------------------------------------------|
| | 0 | Certified copy of approved Application for Maternity Leave |
| | | Certified copy of Maternity Leave Clearance |
| | | Medical Certificate for Maternity Leave |
| | | Certification as Solo Parent (for additional 15 days paid leave) |
| | | Certificate of Assumption |
| 4.2 | Gener | al claims through the Automated Teller Machine (ATM) |
| | | Approved Salary Payroll |
| | | Approved Payroll Register (hard and soft copy) |
| | | Letter to the bank to credit employees' account of their salaries or other claims stamped "Received" by the bank |
| | | Validated deposits slips/LDDAP-ADA, if applicable |
| | | |
| Allo | wance | s, Honoraria and Other Forms of Compensations |
| 5.1 | Cloth | ing/Uniform Allowance |
| | For It | ndividual Claims |
| | ۵ | Certificate of Assumption (for new employee and those on leave without pay) |
| | | Certificate of Non-payment from previous agency, for transferees |
| | For C | General Claims |
| | | Approved Clothing/Uniform Allowance Payroll |
| | | Approved Payroll Register (hard and soft copy) |
| | | Letter to the bank to credit employees' account of their allowance |
| | 0 | Validated deposit slips/LDDAP-ADA, if applicable |
| 5.2 | Colle | ctive Negotiation Agreement (CNA) Incentive |
| | | Resolution signed by both parties incorporating the |
| | - 1/2 101 | guidelines/criteria for granting CNA incentive |
| | | Copy of CNA |
| | | Comparative statement of DBM approved level of operating |
| | 1000 | expenses and actual operating expenses |
| | 0 | Proof of remittance to the National Treasury of its 50 percent dividends share or percentage approved by the Department of |
| | | Finance on the annual earnings for income generating GCs/GFIs Certification issued by the Head of Agency on the total amount of |

5.0

| | • | identified in the CNA which resulted from the joint efforts of labor and management and systems/productivity/income improvement Proof that the planned programs/activities/projects have been implemented and completed in accordance with targets for the year |
|-----|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5.3 | Hazai | rd Duty Pay |
| | | Certification by the Secretary of the Department of Science and Technology (DOST)/ Department of Health (DOH)/Department of National Defense (DND)/Director of the Philippine Institute of Volcanology and Seismology that the place of assignment/travel is a strife-torn/embattled/disease-infested/distress or isolated areas/stations, or areas declared under state of calamity or emergency, or with volcano activity or eruption. |
| | 0 | Approved DTR/Report or Duly Accomplished Time Record of employee or travel report. |
| | | Copy of Special Order from the agency/department Head covering the assignment to hazardous/difficult areas. |
| | 0 | For non-DOST personnel, Certification from DOST Secretary showing the degree of risk to hazards, actual exposure and rates |
| | | Certification issued by the Chief Accountant that the amounts received by the recipient/s are compliant with the rules and rates on hazard pay set under Item 3 of DBM-DOH Joint Circular No. 1, series of 2012 and DBM-DOH Joint Circular No. 1, series of 2016, and any future amendments thereof. |
| 5.4 | Hono | raria |
| | 5.4.1 | Government Personnel Involved in Government Procurement |
| | | Office Order creating and designating the BAC compositions and authorizing the members to collect honoraria |
| | | Minutes of BAC meetings |
| | | Notices of Award to the winning bidders of procurement activity being claimed |
| | | Certification that the procurement involves competitive bidding |
| | | Attendance sheet listing the names of attendees to the BAC meetings |
| | | Certification issued by the Chief Accountant that the amounts received by the recipient/s do not exceed 25% of the annual basic salaries pursuant to DBM Budget Circular No. 2004-5A dated October 7, 2005 and any future amendments thereof |
| | 5.4.2 | Teaching Personnel [Department of Education (DepEd), TESDA, SUCs and other educational institutions |
| | 0 | Certification from the Registrar/Dean of College that the load is in excess of the regular load or outside the regular office hours Schedule of classes indicating the designated teaching personnel |
| | | Certificate of actual conduct of classes and/or Accomplishment Report |

| | Service Report |
|-------|-----------------------------------------------------------------------------------------|
| | Certification issued by the Chief Accountant that the amounts |
| | received by the recipient/s do not exceed the limits pursuant to |
| | pursuant to Item 7.13.1, Chapter VII of the DBM Manual on |
| | Position Classification and Compensation |
| 5.4.3 | Governing Boards of Collegial Bodies |
| | Appointment/designation as member of the Board |
| 0 | Certification that the claimant is not an appointee to a regular |
| _ | position in the governing board of collegial body who receives |
| | salaries, regular allowances and other benefits. |
| | Minutes of Meeting and Attendance Sheet as certified by the Board |
| _ | Secretary |
| | Certification issued by the Chief Accountant that the amounts |
| | received by the recipient/s do not exceed the limits pursuant to DBM |
| | BC No. 2007-510 dated May 8, 2007 and any future amendments |
| | thereof |
| 5.4.4 | Resource Person/Coordinator/Facilitator |
| | |
| | Office Order for their designation with authority to collect |
| SE I | honorarium |
| | Authority to Conduct the Training/Seminar and the participants |
| | Course Outline/Program |
| | Copy of the Letter/Invitation to Guest Resource Speaker/Persons (as accepted/conformed) |
| | Certification issued by the Chief Accountant that the amounts |
| | received by the recipient/s do not exceed the limits pursuant to DBM |
| | BC No. 2007-001 dated April 23, 2007 and any future amendments |
| | thereof |
| 5.4.5 | 5 Special Projects |
| | Office Order for the creation of the Special Project Team |
| ä | Special Project Plan |
| ä | Terms of Reference |
| 0 | Accomplishment Report/Certificate of Completion of project |
| _ | deliverables |
| | Certificate of acceptance by the Agency Head of the deliverables per |
| _ | project component |
| | Certification issued by the Chief Accountant that the amounts |
| _ | received by the recipient/s do not exceed 25% of the annual basic |
| | salaries pursuant to DBM BC No. 2007-2 dated October 1, 2007 and |
| | any future amendments thereof |
| | Any luture amendments thereof |
| 544 | Science and Technological Activities |
| 3.4.0 | Science and recumological Activities |
| | Office Order or Authority to collect honoraria |
| ä | Plan/Program of Activities with specific deliverables/project output |
| | |

| | | Accomplishment Report/Certificate of Completion of programmed activities certified by the manager/Head/proponent of the Special Project and to be approved by the Head of the Agency or his/her | | | |
|-----|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | | designated official. Certificate of Acceptance by the Agency Head of the | | | |
| | | deliverables/project output | | | |
| | | Certification issued by the Chief Accountant that the amounts received by the recipient/s do not exceed 25% of the annual basic salaries pursuant to Section 4.3 on Honoraria Rates of DBM-DOST Joint Circular No. 01, s. 2013 dated June 25, 2013 and any future amendments thereof. | | | |
| 5.5 | Long | evity Pay | | | |
| | | Service Record | | | |
| | | Certification issued by the Personnel Officer that the claimant has not incurred more than 15 days of vacation leave without pay | | | |
| 5.6 | Loya | ty Cash Award/Incentive/Service Recognition Award | | | |
| | For I | ndividual Claims | | | |
| | | Service Record | | | |
| | ā | Certificate of non-payment from previous office (for transferee) | | | |
| | ā | Certificate from HRO/U that the claimant has not incurred more than 50 days leave without pay within the preceding 5-year period, as the case may be, or proof of eligibility to receive incentive/service recognition | | | |
| | For (| General Claims | | | |
| | | Loyalty Cash Award/ Incentive/Service Recognition Award Payroll | | | |
| | <u> </u> | Certificate from HRO/U that the claimants have not incurred more than 50 days leave without pay within the preceding 5-year period, as the case may be, or proof of eligibility to receive incentive/service recognition | | | |
| | | Payroll Register (hard and soft copy) | | | |
| | | Letter to the bank requesting to credit employees' account of their PIB claims | | | |
| | | Validated Deposit Slips/LDDAP-ADA, if applicable | | | |
| 5.7 | Mid- | Mid-Year/Year-End Bonus (YEB) and Cash Gift (CG) | | | |
| | г. | I'. : 1 -1 01 -: | | | |
| | For l | individual Claims | | | |
| | | Clearance from money, property and legal accountabilities (retiree) | | | |
| | | Certificate of Assumption to Office (for new employee/transferee) | | | |
| | _ | Certification of non-payment from previous agency (for transferee) | | | |
| | | | | | |

| | For General Claims | | | |
|------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | Bonus and/or CG Payroll | | |
| | | Payroll Register (Hard and soft copy) | | |
| | | Letter to the bank to credit employees account of their Bonus and/or CG claims | | |
| | | Validated Deposit slips/LDDAP-ADA, if applicable | | |
| 5.8 | Mon | etization of Leave Credits | | |
| | | Approved leave application with leave credit balance certified by the Human Resources Officer | | |
| | | Request for monetization of leave covering more than ten days duly approved by the Head of Agency | | |
| | | For monetization of 50 percent or more: | | |
| | | Clinical abstract/medical procedures to be undertaken in case of health, medical and hospital needs | | |
| | | o Barangay Certification in case of need for financial assistance brought by calamities, typhoons, fire, etc. | | |
| | | O Justification on financial needs for the education of employee or children | | |
| 5.9 | Over | time Pay | | |
| | | Overtime authority stating the necessity and urgency of the work to be done, names of personnel, the purpose of expected outputs, specific period of such services and the manner of compensating the same i.e. Compensatory Time Off or paid in cash | | |
| | | Overtime Work Program | | |
| | ō | Quantified Overtime Accomplishment duly signed by the employee and supervisor | | |
| | | Certificate of service or duly approved DTR | | |
| 5.10 | Pers | onnel Economic Relief Allowance (PERA) | | |
| | Same 4.2) | e requirements as those for payment of salaries (4.1.1, 4.1.2, 4.1.5-7 & | | |
| 5.11 | Prog | ram on Awards and Incentives for Service Excellence (PRAISE) | | |
| | • | Proof of eligibility to receive PRAISE award in accordance with CSC Memorandum Circular (MC) No. 01-2001 dated January 26, 2001 and any future amendments thereof | | |
| | | Approved payroll | | |
| | | Q/ | | |
| | | P ₁ | | |

5.12 Productivity Incentive Bonus (PIB) or Productivity Enhancement Incentive (PEI)

| | For Individual Claims | | | | | |
|------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| | | Certification that the performance ratings for two semesters given to the personnel of the concerned division/office are at least satisfactory | | | | |
| | | Certification from the Legal Office that the employee has no administrative charge | | | | |
| | For C | General Claims | | | | |
| | | PIB Payroll | | | | |
| | | List of personnel dismissed within the year | | | | |
| | | List of personnel on absent without official leave (AWOL) | | | | |
| | ā | Certification that the performance ratings for the two semesters given to the personnel of the concerned division/office are at least satisfactory | | | | |
| | | Payroll register (hard and soft copy) | | | | |
| | | Letter to the bank to credit employees' account of their PIB/PEI claims | | | | |
| | | Validated deposit slips/LDDAP-ADA, if applicable | | | | |
| 5.13 | Reim | Reimbursement of Hospital Expenses | | | | |
| | | Duly approved Order of Adjudication | | | | |
| | | Committee Report/Evaluation | | | | |
| | | Medical Abstract/Record | | | | |
| | | Affidavit of the Applicant | | | | |
| | | Affidavit of two (2) disinterested persons | | | | |
| | | Summary of hospital expenses | | | | |
| | | Statement of Account/Bill | | | | |
| | | Official Receipts | | | | |
| 5.14 | Rein | abursement of Pre-employment Medical Expenses | | | | |
| | | Copy of Approved Appointment | | | | |
| | | Copy of Certificate of Assumption to Office | | | | |
| | | Official Receipts/eOR/AR or equivalent | | | | |
| 5.15 | Repr | resentation and Transportation Allowance (RATA) | | | | |
| | For I | ndividual Claims | | | | |
| | | Copy of Appointment/Office Order (1st payment) | | | | |
| | | Certificate of Assumption (1st payment) | | | | |
| | | Certificate or evidence of service rendered or Approved DTR | | | | |
| | 0 | Certification that the official/employee did not use government vehicle | | | | |
| | | V V | | | | |

| | _ | and the second s |
|------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | Certification by the LCE, in case of LGUs, that the revised RATA |
| | | rates are still within the PS limitation |
| | | Certification on the Actual Incurrence of RATA (for those with |
| | | authorized monthly commutable representation and transportation |
| | | allowance) |
| | For G | General Claims |
| | Π. | American DATA marroll |
| | | Approved RATA payroll Approved Payroll Register (hard and soft copy) |
| | 0 | Letter to the bank to credit employees' account of their RATA |
| | | claims, if applicable stamped "Received" by the bank |
| | | Validated Deposit Slip/LDDAP-ADA, if applicable |
| | | validated Deposit Ship EDD H 11D11, H application |
| 5.16 | Retir | ement Benefits |
| | | Updated Service record indicating the number of days on leave |
| | | without pay and/or certification issued by the Human Resource |
| | | Office/Unit (HRO/U) that the retiree did not incur any leave of |
| | | absence without pay |
| | | Retirement application |
| | | Office clearance from money/property accountability & |
| | | administrative/criminal liability |
| | | Statement of Assets, Liabilities and Net worth (SALN) |
| | | Retirement Gratuity Computation |
| | | Certificate from the Office of the Ombudsman indicating whether or |
| | | not the retiree has a pending criminal or administrative case |
| | | Affidavit of Undertaking with authority to deduct accountabilities |
| | | Affidavit of applicant that there is no pending criminal investigation |
| | | or prosecution against him/her. |
| | Addit | tional requirement in case of resignation |
| | | Employee's letter of resignation duly accepted by the Agency Head |
| | Addit | tional requirements in case of death |
| | | Death certificate issued by Philippine Statistics Authority (PSA) |
| | | Marriage Certificate issued by PSA |
| | | Birth certificates of all surviving legal heirs issued by PSA |
| | | Waiver of rights of children 18 years old and above, if applicable |
| | | Designation of next-of-kin |
| | | Affidavit of two disinterested parties that the deceased is survived by |
| | | legitimate and illegitimate children (if any), natural, adopted or |
| | | children of prior marriage |
| | | |
| 5.17 | Speci | ial Counsel Allowance |
| | | Office Order/Designation/Letter of the Office of the Solicitor |
| | 7. | General (OSG) deputizing the claimant to appear in court as special |
| | | counsel |
| | | Certificate of Appearance issued by the Clerk of Court |
| | 172-6 Te. | The state of the s |

| | | Certification that the cases to be attended by the lawyer personnel are directly related to the nature/function of the particular office |
|------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | represented |
| | | Certification issued by the Chief Accountant that the amount being claimed is still within the limitation under the General Appropriations Act (GAA) of the amount per month |
| 5.18 | Subsi | stence, Laundry and Quarters Allowances |
| | For Ir | ndividual Claims |
| | | Authority for entitlement to collect the benefit approved by Agency Head |
| | | Approved DTR |
| | <u> </u> | Certification from the Legal Office that the employee has no administrative charge |
| | For G | eneral Claims |
| | ۵ | Payroll of personnel entitled to claim subsistence, laundry and quarters allowance |
| | | Payroll register (hard and soft copy) |
| | | Letter to the bank to credit employees' account of their claims |
| | | Validated deposit slips/LDDAP-ADA, if applicable |
| 5.19 | Term | ninal Leave Benefits |
| | | Agency Clearance from money, property and legal accountability from the Central Office and/or from the Regional Office of last assignment |
| | | Ombudsman Clearance |
| | ā | Certified photocopy of employees leave card with computed leave credits as at last date of service by the Personnel |
| | | Division/Unit/Office/Admin/Human Resources Office/Unit (HRO/U) |
| | | Approved leave application |
| | | Complete service record |
| | | Statement of Assets, Liabilities and Net Worth (SALN) |
| | | Certified photocopy of appointment/NOSA |
| | | |
| | ā | 시간에 가장 아이들이 되는데 그는 모든 그 살아 있다. 그리고 있는 |
| | ō | showing the highest salary received if the salary under the last |
| | | appointment is not the highest. |
| | | Computation of terminal benefits duly signed/certified by the Chief |
| | | Accountant |
| | • | Applicant's authorization (in affidavit form) to deduct all financial obligations with the employer/agency LGU |
| | | In case of resignation, employee's letter of resignation duly accepted by the Head of the Agency. |
| | | |

| | | Addi | tional requirements in case of death | |
|-----|------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| | | | Death certificate issued by PSA | |
| | | | Marriage Certificate issued by PSA | |
| | | <u>-</u> | Birth certificate of all surviving legal heirs issued by PSA | |
| | | ā | Designation of next-of-kin | |
| | | ā | Waiver of rights of children 18 years old and above, if applicable | |
| | | _ | waiver of rights of children 18 years old and above, if applicable | |
| 6.0 | Oth | er Exp | penditures | |
| | 6.1 | Utili | ty Expenses | |
| | | | Statement of Account/Bill | |
| | | | Invoice/Official Receipt or machine validated statement of | |
| | | , 74 | account/bill | |
| | 6.2 | Tele | phone/Communication Expenses | |
| | | | Statement of Account/Bill | |
| | | | Invoice/Official Receipt or machine validated statement of | |
| | | | account/bill or collection and acknowledgement receipts. | |
| | | | Certification by Head of Agency or his authorized representatives | 3 |
| | | | that all National Direct Dial (NDD), National Operator Assisted | |
| | | | Calls and International Operator Assisted Calls are official calls. | |
| | | | Authority from the Head of Agency for entitlement to Mobile pho | one |
| | | | Certification from the Chief Accountant and Property Officer that | |
| | | _ | the employee was not issued a postpaid plan for mobile phone. | |
| | | | | |
| 7.0 | Exti | raordi | nary and Miscellaneous Expenses | |
| | | spent | fication executed by the official concerned that the amount claimed for the purpose and in the amount not exceeding the limit indicate eneral provisions of the GAA | |
| | | | vant Invoices/Receipts, if the amount claimed was spent for the purp in the amount exceeding the limit indicated in the general provision | |
| | | the G | 맛있다면서 그는 이렇게 하는데 하는 보다는 이번에 가장하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 | |
| | | | tes of the meeting if used for the purpose of meetings, seminars | and |
| | _ | | erences | |
| | | | adance Sheet | |
| | _ | Atten | diance sheet | |
| 8.0 | Pris | oner's | Subsistence Allowance | |
| | Вуа | dmini | stration thru cash advance | |
| | | Gran | at of Cash Advance | |
| | | | | |

| | | 0 | Roster of Inmates duly certified by the Jail Warden/Superintendent Certificate from the concerned officials on actual number of inmates (jail population) |
|---|--------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | Liqu | nidation of Cash Advance |
| | | | Menu |
| | | <u>.</u> | Roster of Inmates duly certified by the Jail Warden/Superintendent |
| | | 0 | Certificate from the concerned officials on actual number of inmates |
| | | _ | |
| | | | (jail population) Summary of Committed and Released Inmates on a daily basis duly |
| | | _ | |
| | | П | signed by the Jail Warden/Superintendent Certificate of discharge on a daily basis, if there is any, duly signed by |
| | | | the Jail Warden/Superintendent and other responsible officials |
| | | | |
| | | | Report of disbursement duly supported with necessary documents |
| | | | depending on the nature of expenses |
| | By | Caterir | ng Contract |
| | | - | |
| | | | Catering Contract Agreement or MoA |
| | | | Menu |
| | | | Roster of Inmates duly certified by the Jail Warden/Superintendent |
| | | | Certificate from the concerned officials on actual number of inmates |
| | | | (jail population) |
| | | | Summary of Committed and Released Inmates on a daily basis duly |
| | | | signed by the Jail Warden/Superintendent |
| | | • | Certificate of discharge on a daily basis, if there is any, duly signed by the Jail Warden/Superintendent and other responsible officials |
| 0 | | | nent of Goods, Consulting Services and Infrastructure Projects ess of Mode of Procurement) |
| | | | [18] [18] [18] [18] [18] [18] [18] [18] |
| | For | all typ | pes of procurement |
| | 0 | or | rtified copy of the page of the approved Annual Procurement Plan (APP) Supplemental APP where the particular Goods, Consulting Services d/or Infrastructure Projects subject of payment is indicated. |
| | | | rtified copy of the submitted Contract or Purchase Order stamped |
| | J. Tie | | eceived" by COA of the documentary requirements required by COA |
| | | | rcular No. 2009-001 dated February 12, 2009 and COA Memorandum |
| | | | . 2005-027 dated February 28, 2005 (Annex A-T) and any future |
| | | | endments thereof |
| | | | tter request for payment from contractor/supplier |
| | | | |
| | 9.1 | Infr | astructure Projects |
| | | Add | itional Documentary Requirements |
| | | | N N |
| | | 9.1.1 | 1 Advance Payment for Mobilization Cost |

| | Irrevocable Standby Letter of Credit/Security Bond/Bank Guarantee |
|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Notice of Award |
| | Notice to Proceed |
| 9.1.2 | Progress Payments |
| | Statement of Work Accomplished (SWA) |
| | Progress Billing Statement |
| | Inspection Report by the Agency's Authorized Engineer |
| | Results of Test Analysis, if applicable |
| | Contractor's Affidavit on payment of laborers and materials |
| | Pictures/Geotagged Photos, before, during and after construction of |
| | items of work especially the embedded items |
| | Certificate of Percentage of completion |
| 9.1.3 | Final Payment |
| 0 | As-Built Plans |
| | Final SWA |
| | Warranty Security |
| | Certificate of Completion |
| | Copy of turn-over documents/transfer of project and facilities such as |
| | motor vehicles, laptops, and other equipment and furniture included |
| | in the contract to concerned government agency |
| | Certificate of Acceptance by the Agency |
| | Final Inspection Report of the Agency's authorized Engineers and/or |
| | Inspectorate Team |
| | Statement of Time Elapsed |
| | Pictures/Geotagged Photos before, during and after construction of items of work especially the embedded items |
| 9.1.4 | Release of Retention Money |
| • | Warranty security in form of cash, bank guarantee, irrevocable standby letter of credit from a commercial bank, GSIS or surety bond callable on demand |
| | Certification from the end-user that the project is completed, inspected |
| | and accepted. |
| Con | sulting Services |
| Addi | itional Documentary Requirements |
| | Copy of curriculum vitae of the consultant |
| | Copy of the Terms of Reference or Contract (for first payment) |
| | Approved consultancy Progress/Final Reports, and/or output required |
| | under the contract |
| | Progress/Final Billing |
| | (1) |

9.2

| | Contract of Infrastructure Projects subject of Project Management Consulting Services |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| God | ods |
| Ada | litional Documentary Requirements |
| 9.3. | 1 Supplies, Materials, Equipment and Motor Vehicles |
| 0 | Purchase Requisition (PR) Original copy of Dealers/Suppliers' Invoices showing the quantity, description of the articles, unit and total value, duly signed by the dealer or his authorized representative |
| 00 | Results of Test Analysis, if applicable Tax receipts from the Bureau of Customs or the BIR indicating the exact specifications and/or serial number of the equipment procured by the government as proof of payment of all taxes and duties due on the same equipment, supplied or sold to the government |
| 00 | Delivery receipt duly received. Inspection and Acceptance Report prepared by the Department/Agency property inspector and signed by the Head of Agency or his authorized representative |
| 00 | Property Acknowledgement Receipt (PAR), for equipment. Warranty Security for a minimum period of three months, in the case of expendable supplies, or a minimum period of one year in the case of semi-/non-expendable supplies, after acceptance by the procuring entity of the delivered supplies |
| | Authority to purchase, in case of motor vehicles For Procurement of drugs and medicines Certificate of product registration from Food and Drug Administration (FDA) Certificate of good manufacturing practices from FDA Batch release certificate from FDA If the supplier is not the manufacturer, certification from the manufacturer that the supplier is an authorized distributor/dealer of the product/items License to Operate from FDA with List of Sources (whether it is a manufacturer, importer, seller or distributor) Certification by the Medical Officer that medicines and drugs requisitioned is included in the PNDF Current Edition Delivery Receipt/Invoice bearing Lot Nos. and Expiry Dates of the drugs and medicines |
| 9.3. | 2 General Support Services (janitorial, security maintenance, garbage collection and disposal and similar services) |
| 000 | Performance Appraisal Report Statement of Account or Contractor's Bill Record of Attendance/Service |

| | | ů. | Security System (SSS)/ECC/Pag-ibig/PhilHealth] |
|------|----------|--------|---------------------------------------------------------------------------------------------------------|
| | | 9.3.3 | Rental Contracts for Property |
| | | | List of prevailing comparable property within the vicinity (for first claim) |
| | | | Vicinity map (for first claim) |
| | | | Bills/Invoices |
| | | | Certificate of Occupancy (space/building) (for first claim) |
| | | 9.3.4 | Repair and Maintenance of Aircrafts, Watercrafts, Equipment and Motor Vehicles |
| | | | Bills/Invoices |
| | | | Pre-Repair Inspection Report |
| | | | Post-Repair Inspection Report |
| | | | Repair History of Property |
| | | | Waste Materials Report |
| | | | Warranty Certificate |
| | | | Certificate of Acceptance |
| | | 9.3.5 | Advertising Expenses |
| | | | Job Order or Contract |
| | | | Bill/Statement of Account |
| | | | Copy of newspaper clippings evidencing publication and/or CD/DVD |
| | | | in case of TV/Radio commercial |
| | | | Copy of Approved Agency Media Plan, if any |
| 10.0 | Cult | ural a | nd Athletic Activities |
| | | Bud | get estimates approved by the Head of Agency |
| | | | ce Order |
| | | | ne requirements under procurement depending on the nature of expense the mode of procurement adopted |
| 11.0 | Hun | nan Re | esource Development and Training Program |
| | | Rud | get Estimates Approved by the Head of Agency |
| | <u> </u> | | edule of Training Approved by the Head of Agency |
| | ä | | ements of Account/Bills/Invoices |
| | 0 | | cial Receipts |
| | | | ce Order/Terms of Reference |
| | _ | Om | ce Order/Terms of Reference |
| | | | |
| | | | |

| <u> </u> | Copy of Loan Agreements/Memorandum Agreement |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Statement of Account |
| | Bank Debit memos |
| | Certificate of full payment of loan (for final payment of loan amortization) |
| 13.0 Lega | l Retainer's Fee |
| • | Notarized Retainers Contract, not exceeding one year, between the concerned government agency and the private lawyer or law firm |
| | Written approval of the OSG or Office of the Government Corporate Counsel (OCGG) |
| | Board Resolution authorizing the hiring of a private lawyer or law firm of the concerned government agency |
| | Board Resolution authorizing the concerned government personnel/official to enter into a contract, if applicable |
| | Certificate of availability of funds duly verified by the Audit Team Leader |
| ā | Written approval of COA, if not exempted under COA Circular No. 2021- 003 dated July 16, 2021 |
| | Right-of-Way (ROW)/Real Property |
| 14.1 | Land |
| | Independent Appraisal Report in accordance with RA No. 10752 ⁵ and any future amendments thereof/Regional Committee Resolution indicating the valuation of the land |
| | Applicable BIR Zonal Valuation |
| ā | Certified Photocopy of Authority/Agency Resolution to Purchase Land or Land Rights indicating the approved/established valuations or BIR Zonal Valuations |
| | Deed of Absolute Sale registered with the Register of Deeds where the land is located |
| | Certified Photocopy of Tax Clearance from Assessor's Office where the land is located |
| | Certificate Authorizing Registration (CAR) |
| ā | Proof of payment of Capital Gains Tax (CGT) |
| | Proof of payment of Documentary Stamp Tax (DST) |
| ā | Proof of payment of Transfer Tax |
| ō | If registered land: |
| | o If whole lot is acquired, Transfer Certificate of Title (TCT) Certificate of Land Ownership Award/Original Certificate Title/Emancipation Patent (CLOA/OCT/EP) certified as true copy by the Register of Deeds and Tax Declaration (TD) certified as true copy by the |

12.0 Financial Expenses

⁵ The Right-of-Way Act

Assessor's Office in the name of the procuring entity or previous owner depending on the provisions of the sale If portion of lot is acquired, certified photocopy of TCT and TD in the name of the procuring entity or previous owner with annotation of sale If unregistered land: Certified photocopy of TD in the name of the procuring entity or previous owner with the annotation of sale Notarized Affidavit of Ownership 0 Certification from the City/Municipal Treasurer that the claimant is the sole entity paying the taxes for the property for the past five years Notarized joint affidavit of two adjoining landowners or 0 Barangay/Local Officials concerned attesting to the ownership of the land If claim for payment or amount of sale exceeds ₱50,000 (EO No. 1035), certified photocopy of Claimant's Surety/Indemnity Bond issued by any Insurance Company duly accredited by the Insurance Commission For Payment by Court Decision: Certified photocopy of Court Decision registered with the Register of Deeds where the land is located including all annexes referred to in the Court Decision Certified true copy of TCT for registered land, and TD in the name of the previous owner for unregistered land with Court Decision duly annotated Entry of Judgment Location of the property affected by the project: Parcillary plan 0 Vicinity plan 0 Subdivision plan, if claim is for portion of lot 0 Approved lot plan 0 14.2 Structure/House Approved and Notarized Agreement to Demolish and Remove Improvements (ADRI) / Notarized voluntary undertaking to vacate the project area Certificate of Total Demolition Computation of Replacement Cost duly approved by implementing Office Director supported with current abstract of canvass of construction materials Sketch plan/drawing of house/structure Map showing the location of the structure/house in the project-affected area Certified photocopy of Title (TCT/OCT or CLOA/EP) and TD of land where the house/ structure is erected Notarized landowner's waiver of right/quitclaim houses/structures or establishments if payments will be made to claimants other than the owner Notarized affidavit of ownership with Waiver of Right/Quitclaim to affected house/structure

Certified true copy of owner's identification (ID), Residence Certificate and

Barangay Clearance

| | Certified Copy of Masterlist of Project-Affected-Persons (PAPs) indicating the names of affected house/structure owners approved by authorized personnel | | | | | | | |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| | Pictures of the structures before, during and after the demolition | | | | | | | |
| 14.3 | Improvements (trees, plants, growing fruits, etc.) | | | | | | | |
| • | Permit issued by the Department of Environment and Natural Resources (DENR) to cut plants, forest trees and fruit bearing trees on areas affected by the project. | | | | | | | |
| | Affected Trees/Crops Inventory duly certified by the Agency's Project Committee/Authorized Officer and showing among others the following: o Lot number as indicated in the project plan and the owner o Number of items, specifies classification, diameter, height o Owner of trees/plants/crops; and o Price | | | | | | | |
| | Quitclaim or Waiver issued by the lot owner if he is not the claimant | | | | | | | |
| | Map/sketch plan showing the location of the improvement in the project-affected area | | | | | | | |
| | Resolution/approval of valuation of damaged improvement | | | | | | | |
| | Copy of approved valuation of crops, plants and trees issued by concerned government agency | | | | | | | |
| | Notarized Affidavit of Ownership with Right/Quitclaim to affected improvements | | | | | | | |
| | Copy of latest updated masterlist of PAPs approved by proper authorities | | | | | | | |
| | If registered land: | | | | | | | |
| | o Certified true copy of title (TCT/OCT or CLOA/EP) | | | | | | | |
| | If unregistered land: | | | | | | | |
| | o Certified photocopy of TD | | | | | | | |
| | Notarized joint affidavit of two adjoining landowners or barangay/local officials concerned attesting to the ownership of land | | | | | | | |
| | If payment through Court Decision: | | | | | | | |
| | o Certified photocopy of Court Decisions (Final Order/Decisions or Notice/Certificate of Finality of Decision) | | | | | | | |





Certification

| This is to certify that Mr/Ms. | , School |
|-----------------------------------------|------------------------------------------|
| Head of | , is eligible for a |
| monthly provision of prepaid/postpaid a | nobile phone communication expenses per |
| D.O. No. 002 s. 2023. | |
| Furthermore, it is also certified th | at the communication expense incurred by |
| him/her amounting to Php | _ were all official calls in nature. |
| Issued upon the request of the, 2023 | School Head/Principal, this day of |

WILLIAM E. GANDO, CESO VI Schools Division Superintendent



Sorsogon Sports Complex, Brgy. Balogo, Sorsogon City, Sorsogon 4700

Landline: (056) 421-5415 Email: sorsogon@deped.gov.ph Website: depedsorsogon.com.ph



Republic of the Philippines Department of Education Region V SCHOOLS DIVISION OF SORSOGON

Certification of Non-Issuance of Postpaid Plan or Mobile Phone

| | This | is | to | certify | that | Mr./Ms. | (Name) | |
|-------|----------|-------|--------|-----------|--------|-------------|-------------------------------------------------|-------|
| (posi | tion) | | | | P 29 | of (statio | on) | 11.14 |
| was | not issu | ied v | with a | a postpai | d plan | or a mobile | phone. | |
| telep | | | | | | 47 | as among the requirements Circular 2023-004. | s for |
| | | | | | | | | |
| | | | | | | Propert | y Officer/ Chief Accountant | |



Sorsogon Sports Complex, Brgy. Balogo, Sorsogon City, Sorsogon 4700

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