

LIST OF DUE AND DEMANDABLE ACCOUNTS-ADVICE TO DEBIT ACCOUNTS (LDDAP-ADA)

LDDAP-ADA-101-2017-01-004

1/17/2017

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

DATE: FUND CLUSTER: 01

OPERATING UNIT

REGIONAL OFFICE IV-B

No. OF DV: 3

FUND CODE

01101101

MDS-GSB BRANCH

LAND BANK OF THE PHILIPPINES-CASH DEPARTMENT, MALATE MANILA

MDS SUB ACCOUNT

2340-9001-65

NCA NUMBER

NCA-BMB-B-17-000052-3

LIST OF DUE AND DEMANDABLE ACCOUNTS-ADVICE TO DEBIT ACCOUNTS (LDDAP-ADA)

CREDITOR		In Pesos					
NAME	PREFERRED SERVING BANK/SAVINGS/CURRENT ACCOUNT NO.	OBLIGATION REQUEST NO.	ALLOTMENT CLASS (per UACS)	GROSS AMOUNT	WITHHOLDING TAX	NET AMOUNT	REMARKS (FOR MDS-GSB USE ONLY)
I. Current Year A/Ps							
DSWD IV-B PAYROLL ACCOUNT	3 4 0 2 1 0 3 0 0 0	02-101101-2017-01-0036	5021199000	181,040.20		181,040.20	
DSWD IV-B PAYROLL ACCOUNT	3 4 0 2 1 0 3 0 0 0	02-101101-2017-01-0035	5010102000	377,339.14		377,339.14	
DSWD IV-B PAYROLL ACCOUNT	3 4 0 2 1 0 3 0 0 0	02-101101-2017-01-0034	5010102000	565,145.26		565,145.26	
*****nothing follows*****							
Sub-total				1,123,524.60		1,123,524.60	
II. Prior Years' A/Ps							
*****nothing follows*****							
Sub-total				1,123,524.60		1,123,524.60	

I hereby warrant that the above List of Due and Demandable A/Ps was prepared in accordance with existing budgeting, accounting and auditing rules and regulations.

I hereby assume full responsibility for the veracity and accuracy of the listed claims and the authenticity of the supporting documents are submitted by the claimants

Certified Correct by:

EDWARD S. MANAOG
Accountant III

Approved by:

JOEL S. MUIÑEZ
ARD for Administration

II. ADVICE TO DEBIT ACCOUNT (ADA)

To MDS-GSB of the Agency **LAND BANK OF THE PHILIPPINES-CASH DEPARTMENT**
 Please debit MDS Sub-Account Number **2340-9001-65**
 Please credit the accounts for the above listed creditors to cover payment of accounts payable (A/Ps).
ONE MILLION ONE HUNDRED TWENTY THREE THOUSAND FIVE HUNDRED TWENTY FOUR PESOS AND 60/100 ONLY
 TOTAL AMOUNT: **PHP 1,123,524.60**

Agency Authorized Signatories

EVELYN LEGASPI
AO V/Regional Cashier

JOEL S. MUIÑEZ
ARD for Administration

(ERASURES SHALL INVALIDATE THIS DOCUMENTS)

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