


Department: Department of Health
 Agency: Office of the Secretary
 Operating Unit: St. Anthony Mother and Child Hospital
 Organization Code (UACS): 130011400045


PARTICULARS	UACS CODE	TOTAL PROGRAM	TAX. REM ADVICE (TRA)	NET PROGRAM	FULL YEAR REQUIREMENT																FULL YEAR BUDGET	
					QUARTER 1				QUARTER 2			QUARTER 3				QUARTER 4					TOTAL	
					JAN.	FEB.	MAR.	TOTAL	APRIL	MAY	JUNE	TOTAL	JULY	AUG.	SEPT.	TOTAL	OCT.	NOV.	DEC.	TOTAL	TOTAL	
1	2	3	4	5	6	7	8	9=6+7+8	10	11	12	13=10+11+12	14	15	16	17=14+15+16	18	19	20	21=18+19+20	22	
Continuing Appro.-Unreleased Appropriation																						
MOOE																						
CO																						
Continuing Appro.-Unobligated Appropriation																						
MOOE																						
CO																						
TOTAL PROGRAM, PY BUDGET																						
PS																						
MOOE																						
CO		10,240	512	9,728	3,078	-	3,325	6,403	-	3,325	-	3,325	-	-	-	-	-	-	-	-	-	9,728
C. TOTAL NCA PROGRAM																						
PS		42,835	3,005	39,830	3,180	3,180	3,337	9,697	3,573	3,855	3,080	10,508	3,080	3,080	3,080	9,240	3,080	3,711	3,594	10,385	39,830	
MOOE		8,920	446	8,474	706	706	706	2,118	706	706	707	2,119	706	706	706	2,118	706	706	707	2,119	8,474	
CO		10,240	512	9,728	3,078	-	3,325	6,403	-	3,325	-	3,325	-	-	-	-	-	-	-	-	-	9,728
Tax Remittance Advice (TRA)																						
PS		-	3,005	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
MOOE		-	446	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
CO		-	512	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,078


Prepared By:

Prepared By:

Approved By:


 ROY CAESAR IAN G. CAGALAWAN
 Accountant II
 Date: December 29, 2015


 BLANQUITA D. BABON, MPA
 Administrative Officer V
 Date: December 29, 2015


 ROBERT M. DENOPOL, MD, MPA
 Chief of Hospital II
 Date: December 29, 2015