

| CORPORATE GOVERN   | ANCE  | Document Code:<br>MMC-GOP-GLD-006  | Rev. Code :<br>00 |
|--|---|--|-------------------|
| Petty Cash Fund  | Effective Date: October 1, 2021 Page 1 o    |  | Page 1 of 13      |
| Issued by: Compliance Department   | ✓New  | Supersedes Policy on Petty Cash Fund Rev 02                                |                   |
| Approved by:   |   |  |                   |
| (original document signed) Atty. German Q. Lichauco II Corporate Secretary | Oct/07/2021<br>Date Signed<br>(MMM/DD/YYYY) | (original document signed) Manuel V. Pangilinan Chair, MDI Board of Direct | Date Signed       |

This Policy recognizes that Petty Cash Funds can provide a convenient and efficient way to pay for small expenses, but such form of cash disbursement may be prone to misuse and expose the company to the risk of theft. This Policy provides procedures designed to mitigate these risks. The aim of this Policy is to establish when the usage of petty cash is appropriate and how Makati Medical Center (MMC), its directors, officers, executives, employees, and consultants should document requests and usage of petty cash. It lays down the proper arrangements for the holding of, payment from, and accounting for Petty Cash. The overall objective of this Policy is to encourage an effective administration and internal control of petty cash handling operations throughout the Company.

#### Objective:

To set guidelines for all disbursements through Petty Cash Fund.

#### Scope:

This policy shall apply to all Petty Cash Custodians of the Hospital.

#### **Definition of Terms:**

<u>Petty Cash Fund</u> - a revolving imprest account which is used to make miscellaneous or emergency reimbursements.

<u>Petty Cash Custodian</u> - shall refer to any individual who is handling/maintaining the Petty Cash Fund of a particular Department or Section of Makati Medical Center.

<u>Employee</u> - shall refer to any individual employed by Makati Medical Center.

#### **Policy:**

Petty cash fund shall cover expenses incurred from the Company's daily operation needs that will not exceed the amount of **Php 5,000.00** (five thousand pesos) per single request. Expenses shall include reimbursements or cash advances for, but not limited to, the following:

- Meal and transport allowance/expenses, subject to provisions of duly approved travel authorization form and policies/procedures on allowances.
- Various materials, i.e., spare parts, consumables and office supplies, provided that the materials are not available at the stockroom;



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- Representation expenses including wreaths and gift items (with prior approval by Compliance Officer and the Chief Finance Officer or Chief Executive Officer);
- Meeting expenses;
- Fees paid to government agencies (unless with prior approval by Compliance Officer and the Chief Finance Officer or Chief Executive Officer);
- Auto repair services;
- Miscellaneous fees i.e. brokerage, postage, photocopy, notaries, film developing, key duplication, and rubber stamps, among others.

Petty cash is only allowed for expenses and payments of amounts not to exceed Php 5,000.00 per transaction. Receipts for the same activity exceeding Php 5,000.00 cannot be split among multiple vouchers to circumvent the Php 5,000.00 limitation and be claimed as a petty cash expense.

Only purchases of not more than Php 5,000.00 threshold which are not ordinarily available from an accredited supplier of the Company may be purchased through Petty Cash.

An exception to usage of petty cash for forbidden nature of expenses (as indicated below) would be in the case of emergency purchases, after official business hours and this has to be authorized and ratified by at least two (2) Departmental Heads.

A petty cash fund may be established in a department when it can be demonstrated that a continuing cash advance should be kept on hand to permit purchase of items or services necessary to conduct daily operations in a most efficient and effective manner. This kind of petty cash fund assignment shall be known as Revolving Fund and shall be subjected to the same policies and procedures of petty cash fund.

#### **Guidelines:**

- A. <u>Set-up, Release and Replenishment of Petty Cash Fund</u>
  - 1. A <u>Request to Establish a Petty Cash Fund form (Appendix I)</u> should be filled up by the Requesting employee or Department Manager duly noted by the Department Head and shall require the approval of VP Finance.
  - 2. Upon approval, Finance Division Treasury Department, shall release the funds to the Department through check issuance. Finance Division-Treasury Department records the transaction as follows:
    - Dr. Petty Cash Fund/Revolving Fund xx
    - Cr. Cash In Bank xx
  - 3. The Petty Cash/Revolving Fund should be replenished when the fund is at least 50% utilized or as otherwise determined by the VP Finance.
  - 4. Finance Division shall only allow replenishment of the Petty Cash/Revolving Fund if request is duly supported by the reimbursement forms of the expenses drawn from the fund. Thus, the Summary



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of Expenses together with the supporting paid reimbursements and cash advance/liquidation forms and Official Receipts, if any, should be attached to the request for replenishment.

## B. Limitation on use of petty cash

- Petty cash expenditure should be restricted to those purchases where there is no practical
  alternative method of payment, for example Patient Travel, or purchases of small value
  items.
- The use of petty cash should not be a means for bypassing other existing expenditure controls in the Company. It should not be used for payroll, staff travel or subsistence expenses, where it is possible that tax implications may apply.
- Petty cash should not be used for the purchase of electrical items, unless with appropriate health and safety checks from Facilities Management and Engineering Division.
- Loans or advances to employees for personal use from Petty Cash funds are forbidden.
- Use of petty cash is also forbidden for the following nature of expenses:
  - All expenses related to Foreign Travel
  - Airfare for Domestic Travel
  - Salary, Awards and Bonuses
  - Stipends (Non-Employees)
  - Subject Fees/Study Participants
  - Consulting/Professional Services
  - Honorariums
  - Contracts of any type
  - Individual and Institutional Dues and Membership Fees
  - Entertainment and gifts (unless with prior approval by Compliance Officer and the Chief Finance Officer or Chief Executive Officer)
  - Donations, Grants, & Sponsorships
  - Payment to Government Officials<sup>1</sup>/agencies or third parties interacting with Government Officials/agencies including permit and licenses (unless with prior approval by Compliance Officer and the Chief Finance Officer or Chief Executive Officer)

#### **Procedure:**

| When a  | petty    | cash/revolving  | fund | has | been | authorized | for | а | department, | the | following | operating |
|---------|----------|-----------------|------|-----|------|------------|-----|---|-------------|-----|-----------|-----------|
| procedu | ires mus | st be followed: |      |     |      |            |     |   |             |     |           |           |



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#### A. Designation of Petty Cash Fund Custodian

A custodian of the fund, who is directly responsible for the safekeeping and disbursement of the cash, must be appointed by the Division Head and concurred by the Chief Finance Officer. The original check or amount paid to establish the fund and replenishments thereof is issued to the Petty Cash Fund Custodian. Written procedures that must be followed in using revolving fund should be provided to the custodian.

#### B. Authorized User of Petty Cash Fund

- 1. Only regular employees shall be authorized to receive petty cash reimbursements or cash advance. The signature of the requesting personnel shall affixed on the "Received By" portion of the Reimbursement form or cash advance form whichever is applicable;
- 2. Expenses paid from a petty cash fund can only be made for the purposes(s) for which the fund was authorized and must be supported by reimbursement/cash advance forms or liquidation forms together with the receipts, which should contain the following information:
  - Date of purchase or payment;
  - Name of vendor or other payee;
  - Positive evidence that a payment was made i.e., official receipt or cash register receipt or a handwritten receipt on which the word "paid" appears only for items that cannot be supported by the official receipt.;
  - Amount paid;
  - Description of the goods purchased (entered by the vendor in the receipt obtained) or of the services provided;
  - The corresponding official receipt or proof of payment shall be attached to the Petty Cash Voucher (PCV) form or liquidation form. Expenses that are not generally covered by receipts like jeepney fare, mail stamps, etc., shall be written in the PCV form or liquidation form with itinerary disclosed and signature indicating receipt of purchases or services.
- 3. All paid reimbursements/cash advance or liquidation forms as well as receipts or supporting documents should be stamped "PAID" and also indicate the date of payment to avoid double payment and shall be kept under the custody of the Petty Cash Custodian for monitoring purposes. The Custodian shall file all paid reimbursement/cash advance/liquidation form and official receipts until replenishment is requested;
- 4. All requests for cash advance through petty cash must be supported by properly completed and duly approved IOU Form. A complete IOU consists of:
  - Breakdown of estimated costs for which the cash advance is to be used;



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- Sign-off on the acknowledgement of his understanding of the Company's policies to liquidate within three (3) working days from the date the advance is actually released or date of arrival in case of domestic travel advances.
- 5. In no case shall the requesting employee split the cash advance or reimbursement to satisfy the requirement of petty cash disbursement. It is the responsibility of the Petty Cash custodian to ensure that this policy is complied with;
- 6. <u>A Month-End Report of Petty Cash Fund Balance (Exhibit III)</u> shall be prepared and submitted to the Finance Treasury Department on the 1<sup>st</sup> working day of the following month to ensure the cash and expenses are accounted for.
- 7. Total receipts plus the cash on hand must be equal to the specified amount of the petty cash fund at all times.

#### C. Replenishment of funds

Reimbursements made to a fund custodian for petty cash/revolving fund expenditures are based on the approved Request for Payment Form (RFP) which must be supported by all payments made (i.e. reimbursement forms, cash advance/liquidation forms, official receipts and other supporting documents). Such request must be approved based on the approval matrix for Request for Payment. In no cases should the request be approved for payment by the Petty Cash Fund Custodian nor an employee who reports to the fund custodian.

A summary of expenses must be prepared and attached to the request for payment form for revolving fund replenishment. Revolving fund expenditures shall be checked by the Treasury supervisor and recorded by the Finance Division – Treasury Department.

Reimbursement shall be recorded as follows:

Dr. Expense (classified accordingly) xx

Cr. Cash in Bank xx

Replenishment should be requested when the fund is at least 50% utilized or as needed.

#### D. Approving Authority

All Petty Cash Voucher forms (PCV), Request for Payment form and liquidation forms must be checked and signed-off by the Department Manager or authorized representative of the department as designated by the Division Head. Payment to government agencies or exemptions to above limitations on use of petty cash is pre-approved by Compliance Officer and by Division Head and one of the following: CEO or CFO.



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#### E. Safekeeping of the Petty Cash Fund

Petty cash/revolving fund must be kept inside a petty cash fund ("PCF") box with lock and key. When not in use, the funds currency must be placed in a safe or locked receptacle, which is kept in a properly secured area. In the event of a theft, the loss must be reported immediately to the Human Resources Management and Development Division (HRMDD) for proper handling.

The Paid forms and supporting receipts shall be kept locked in filing cabinet (under dual custody) at the end of the day.

Safekeeping of the key of the PCF box should be properly observed by the Petty Cash Custodian. Duplicate key of the PCF box and vault must be kept by the Department Head which shall be accessed during the absence of the Petty Cash Holder. In all cases that the alternative custodian shall access the PCF box or vault, the duplicate key assignee shall witness the opening and counting of the PCF and vault.

## F. Reconciliation / Surprise Cash Count -

The Petty Cash Custodian must perform reconciliation and a summary report compiled at least once a month (Appendix III), approved by the Division Head and submitted to the Finance – Treasury Department.

In addition to above, the Chief Financial Officer or Treasury Department designated Officer must perform surprise reconciliation of petty cash funds (Appendix IV) at appropriate intervals.

If losses and/ or shortages are noted from such reconciliation and or surprise checks, the same shall be investigated by Treasury Department Officer to ensure:

- Prescribed procedures were followed;
- Petty Cash was properly secured; and
- There is physical evidence of breaking-in and no act or omission on the part of the Petty Cash Custodian, contributed to loss.

#### G. Recall

The Treasury Department Office may recall a PCF when minimal or no activity has occurred for a period of two (2) months.



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## Responsibility:

It is the responsibility of the Head/ Manager of Department to ensure that funds for such petty cash expenses are available in their budget and to ensure compliance to this policy.

#### Review:

This policy shall be reviewed every three (3) years or earlier as deemed necessary by the Chief Finance Officer or by the Department Manager of Treasury.

### Effectivity

This Policy shall take effect immediately. All existing policies, rules, system practices, and related implementing guidelines concerning the same matters covered by this Policy are deemed superseded. In the event of any inconsistency between the policy and guidelines contained herein and the terms of other existing policies, rules, system practices and related implementing guidelines, the policy and guidelines contained herein shall prevail.

#### Approval, Amendment or Alteration of Policy

This Policy has been approved and adopted by the Medical Doctor's Inc. (MDI) Board of Directors.

The Compliance Department, Leadership and the MDI Board of Directors has the overall responsibility to provide oversight on implementation, monitoring and periodic review (at least every 3 years and when needed as deemed necessary by the Chief Finance Officer or by the Department Manager of Treasury) of this Policy.

This Policy shall not be amended, altered or varied unless such amendment, alteration or variation shall have been approved by resolutions of the Board of Directors.

#### **Training**

Upon initial roll-out of the Policy, all current personnel, trainees and medical staff should be trained and complete attached form and deliver the completed forms to Human Resources / Medical Services / Medical Education and Research in an envelope labeled "Employee Policy Training Certification."



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New personnel, trainees and Medical staff should be trained immediately upon hiring and complete this form and kept in their respective 201 file in Human Resources, Medical Services or Medical Education.

## Responsibilities

Compliance Department provides oversight on the regularly review of this policy at least every 3 years and recommend to Leadership and MDI Board of Directors any modification.

Human Resources - Learning and Development Department / Department Manager or Quality, Safety and Compliance Officer of concerned department in coordination with Compliance Department provides regular training and annual refresher course to hospital personnel within their area of responsibility.

Managers and supervisors are responsible in ensuring that all their staff are aware and implement this policy consistently. In the review of any violation of this policy, managers and supervisors may be held liable for failure to instruct adequately their subordinates or for failure to detect noncompliance with applicable policies and legal requirements, where reasonable diligence would have led to the discovery of any violations or problems and prevent loss for the company.

**Signatories:** 

(original document signed)

Author (s) Melanie D. Moreno

Cashiering Officer

Reviewers Saturnino P. Javier, MD - Medical Director

**Artemio C. Salvador, MD** - Head, Quality Management Division

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Angelita P. Garcia - OIC, Human Resources Management &

**Development Division** 

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- Chief Nursing Officer, Nursing and Patient Eda Bernadette P. Bodegon, RN, MAN **Care Services** Arlyn L. Songco - Head, Creative, Communications, and Sales Services Division Ma. Fleurdeliz C. Atienza - Manager, Procurement Department Isidoro M. Perfecto - OIC, Information & Communications Technology Division **Engr. Gerry E. Cunanan** - Head, Facilities Management and **Engineering Department Division** Bernardo F. Tawatao - Unit Manager Finance Analytics Mary Milagros D. Uy, MD Director, Hospital License & Accreditation Compliance Officer

# **Reviewed and Recommended for Approval:**

(original document signed)
Atty. Pilar Nenuca P. Almira
President and CEO

(original document signed)

**Arnold C. Ocampo**Chief Financial Officer

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| <u>olates</u>               |                      |   |   |    |
|-----------------------------|----------------------|---|---|----|
| EXHIBIT I.                  | REQUEST TO ESTA      | ABLISH A PETTY CAS                              | SH FUND   |    |
| MEMO TO:<br>FROM:<br>DATE:  | Chief Finance Off    | icer  |   | S  |
| SUBJECT:                    | Request to establ    | lish a Petty cash Fun                           | nd  | Þ. |
| cash fund in                |                      |   | st Center) be authorized to establish a pe on for proposed use and estimated month                                | -  |
|                             |                      |   |   |    |
| Building Add<br>and records | dress) and will be s | safeguarded as pres<br>or any scheduled and<br> | ords for this fund will be located in (Roc<br>scribed in the above procedures. The fur<br>d/or unannounced audit. |    |
| Department                  | Head's Signature     | 1   |   |    |
| DO                          | NOT WRITE BELOV      | N THIS LINE                                     |   |    |
| Approved                    |                      | Disapproved                                     |   |    |
| <b>Chief Fina</b>           | nce Officer          | Date  | <del></del>   |    |
| Chief Fina                  | nce Officer          | Date  |   |    |



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| FROM:   | – CONTROLLERSHIP DEPARTMENT   |
|---|---|
| DATE: SUBJECT: Change of Petty Cash Fu                              | nd Custodian  |
| fund has been changed. The new p                                    | dian of the <u>(Department Name/Cost Center)</u> . Petty cash etty cash custodian is <u>(Name of requesting employee)</u> , e custodian is <u>(Name of requesting employees, (Contact</u> ) |
| We certify that at the time of tra                                  | nsfer, the fund was counted and reconciled and the _ was properly accounted for.  |
| As The Present Custodian, I, Cur receipts totaling the amount autho | rently have the following combination of cash and rized for my petty cash fund.   |
| Cash on hand Php Amount in Receipts Total                           |   |
| Signature Outgoing Custodian/Date                                   |   |
| Php on  | I received the total cash and receipts in the amount of That I have read and agree to follow the procedures icies and procedures concerning my responsibilities for om the petty cash fund. |
| Signature New Custodian / Date                                      |   |
| Noted by immediate Supervisor:                                      | Approved by Department Head   |
|   |   |



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|                      |                                    |               |

| Cash Advance (IOUs on hand)  Date Particular Amount  A Total  Cash on Hand  nomination Count Amount  Ils  1,000.00  500.00  200.00  100.00  500.00  200.00  100.00  500.00  200.00  100.00  500.00  200.00  10 | PCV on hand                  |                                    |                  |                      |              |                |                |        |
|--|------------------------------|------------------------------------|------------------|----------------------|--------------|----------------|----------------|--------|
| Cash Advance (IOUs on hand)  Date Particular Amount  A Total  Cash on Hand  nomination Count Amount  Ils  1,000.00 500.00 200.00 100.00 50.00 20.00 0) ins  Istal Month End PCF Balance etty Cash Fund Amount verage (Shortage)  Prepared by:  Petty Cash Custodian Printed Name swer Signature  Printed Name swer Signature   | Date Vendo                   | r Particular                       | Reference        | Transpo              | Meeting      | Supplies       | Representation | Others |
| Cash Advance (IOUs on hand)  Date Particular Amount  A Total  Cash on Hand  nomination Count Amount  Ils  1,000.00 500.00 200.00 100.00 50.00 20.00 0) ins  Istal Month End PCF Balance etty Cash Fund Amount verage (Shortage)  Prepared by:  Petty Cash Custodian Printed Name swer Signature  Printed Name swer Signature   |                              |                                    |                  |                      |              |                |                |        |
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| Cash on Hand nomination Sound  | CV Total                     |                                    |                  |                      |              |                |                |        |
| Cash on Hand nomination Sound  | Cash Aduance (IOHs           | on hand)                           |                  |                      |              |                |                |        |
| Cash on Hand nomination Count Amount IIs 1,000.00 500.00 200.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 20.00 100.00 50.00 100.00 50.00 100. | Date Particul                | on nand)                           |                  |                      |              |                |                |        |
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| Department Head   Printed Name over Signature   Printed Name ove   | 4 Total                      |                                    |                  |                      |              |                |                |        |
| Department Head   Printed Name over Signature   Printed Name ove   |                              |                                    |                  |                      |              |                |                |        |
| Ils 1,000.00 500.00 500.00 100.00 50.00 20 |                              |                                    | _                |                      |              |                |                |        |
| 1,000.00 500.00 200.00 100.00 50.00 20.00  |                              | Amount                             | _                |                      |              |                |                |        |
| S00.00 200.00 100.00 S0.00 20.00 Dins OH Total  Prepared by:  Petty Cash Custodian Printed Name over Signature  Approved By:  Petty Cash Custodian Printed Name over Signature   |                              |                                    | -                |                      |              |                |                |        |
| 200.00   100.00   50.00   20.0 |                              |                                    | 4                |                      |              |                |                |        |
| 100.00 50.00 20.00 20.00 20.00 Dins DH Total  Approved by:  Petty Cash Custodian Printed Name over Signature  Printed Name over Signature  Printed Name over Signature   |                              |                                    | $\dashv$         |                      |              |                |                |        |
| 50.00 20.00  |                              |                                    | $\dashv$         |                      |              |                |                |        |
| 20.00   Dins   DH Total   Department Head   Printed Name over Signature   Department was a super Signature   Department w |                              |                                    | $\dashv$         |                      |              |                |                |        |
| Petty Cash Custodian Printed Name over Signature  |                              |                                    | ┥                |                      |              |                |                |        |
| Petty Cash Custodian Printed Name over Signature  |                              |                                    | ┪                |                      |              |                |                |        |
| Petty Cash Custodian Printed Name over Signature   |                              |                                    | _                |                      |              |                |                |        |
| Petty Cash Custodian Department Head Printed Name over Signature  Petty Cash Custodian Printed Name over Signature   |                              | <u>'</u>                           | _                |                      |              |                |                |        |
| Prepared by: Approved by:  Petty Cash Custodian Department Head Printed Name over Signature Printed Name over Signature  | stal Month End PCF Ba        | alance                             |                  |                      |              |                |                | -      |
| Prepared by:  Petty Cash Custodian  Printed Name over Signature  Approved by:  Department Head  Printed Name over Signature  | etty Cash Fund Amour         | nt                                 |                  |                      |              |                |                |        |
| Prepared by:  Petty Cash Custodian  Printed Name over Signature  Approved by:  Department Head  Printed Name over Signature  | verage (Shortage)            |                                    |                  |                      |              |                |                |        |
| Petty Cash Custodian Department Head Printed Name over Signature Printed Name over Signature   |                              |                                    |                  |                      |              |                | ,              |        |
| Petty Cash Custodian Department Head Printed Name over Signature Printed Name over Signature   |                              |                                    |                  |                      |              |                |                |        |
| Printed Name aver Signature Printed Name aver Signature  |                              | Prepared by:                       |                  |                      | Appro        | ved by:        |                |        |
| Printed Name aver Signature Printed Name aver Signature  |                              |                                    |                  |                      |              |                |                |        |
| Printed Name aver Signature Printed Name aver Signature  |                              |                                    |                  |                      |              |                | _              |        |
|  |                              | Petty Cash Custodian               |                  |                      | Departm      | ent Head       |                |        |
| Submit to the Finance Treasury Department on the 1st working day of the following month.   |                              | Printed Name over Signature        |                  |                      | Printod Namo | ovor Signaturo |                |        |
| Submit to the Finance Treasury Department on the 1st working day of the following month.   |                              |                                    |                  |                      |              |                |                |        |
| Additional interior ineasons beparation to the ist working day of the following month.   | Submit to the Finance Tres   | suru Department on the 1st workin  | a day of the fo  | llowing month        |              |                |                |        |
|  | sabilik to the Find noe Tree | bary beparament of the local ordin | ig day of the fo | ilo ir ir ig morkin. |              |                |                |        |
|  |                              |                                    |                  |                      |              |                |                |        |
|  |                              |                                    |                  |                      |              |                |                |        |
|  | A 4                          |                                    |                  |                      |              |                |                |        |
|  |                              |                                    |                  |                      |              |                |                |        |
|  |                              |                                    |                  |                      |              |                |                |        |



|                      | Document Code:                     | Rev. Code :   |
|----------------------|------------------------------------|---------------|
| CORPORATE GOVERNANCE | MMC-GOP-GLD-006                    | 00            |
| Petty Cash Fund      | Effective Date:<br>October 1, 2021 | Page 13 of 13 |

| 1.Imprest Petty Cash Fund a  | amount         | Php _    |               |                  |
|------------------------------|----------------|----------|---------------|------------------|
| 2.Less Cash on Hand          | 0              |          | <b>A</b>      |                  |
| <u>Denomination</u>          | <u>Count</u>   |          | <u>Amount</u> |                  |
| Bills                        |                |          |               |                  |
| 1,000.00<br>500.00           |                |          |               |                  |
| 200.00                       |                |          |               |                  |
| 100.00                       |                |          | ·····         |                  |
| 50.00                        |                |          |               | ( ) <sup>v</sup> |
| 20.00                        |                |          |               |                  |
| Coins                        |                |          |               |                  |
|                              | Total          | Php      |               |                  |
| 3.Less receipts for expendit | ures           |          |               |                  |
| Form No.                     |                |          | <u>Amount</u> |                  |
|                              |                |          |               |                  |
|                              |                | -        |               |                  |
| Tatal                        |                | Dhu      |               |                  |
| Total                        |                | Php_     |               |                  |
| Sub-total (2+3)              |                |          |               |                  |
| 4. Balance Item 1 minus Iter | m 3 Overage (S | hortage) |               | -                |
| Verified date:               | C. Mir.        |          |               |                  |
| In the presence of Fund Cu   | stodian: _     |          |               |                  |
| Independent Verifier:        | _              |          |               |                  |
| ,0                           |                |          |               |                  |
| SOS E                        |                |          |               |                  |
|                              |                |          |               |                  |
| 70                           |                |          |               |                  |
|                              |                |          |               |                  |
|                              |                |          |               |                  |
|                              |                |          |               |                  |