



REPORT OF CHECKS ISSUED
Period Covered: _____

Entity Name : _____

Fund Cluster : _____

Bank Name/Account No. : _____

Report No.: _____

Sheet No.: _____

CHECK		DV/ PAYROLL NO.	ORS/BURS NO.	RESPONSIBILITY CENTER CODE	PAYEE	UACS OBJECT CODE	NATURE OF PAYMENT	AMOUNT
DATE	SERIAL NO.							

CERTIFICATION

I hereby certify on my official oath that this Report of Checks Issued in _____ sheet(s) is a full, true and correct statement of all checks issued by me during the period stated above for which Check Nos. _____ to _____ inclusive, were actually issued by me in payment for obligations shown in the attached disbursement vouchers/payroll.

Name and Signature of Disbursing Officer/Cashier

Official Designation

Date