

REIMBURSEMENT EXPENSE RECEIPT

Entity Name: <u>BUREAU OF LOCAL GOVERNMENT FINANCE</u>	Fund Cluster : <u>Regular Agency Fund</u>
Date : <u>December 6, 2018</u>	RER No. : _____

RECEIVED from _____
(Name)
 _____ the amount
(Official Designation)
 of _____ (P _____)
(In Words) *(in Figures)*
 in payment for _____
(Payments for subsistence, services,

rental or transportation should show inclusive dates,

purpose, distance, inclusive points of travel, etc.)

PAYEE
Name/Signature _____ Address _____

WITNESS
Name/Signature _____ Address _____