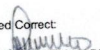


STATEMENT OF APPROVED BUDGET, UTILIZATIONS, DISBURSEMENTS AND BALANCES  
(For Off-Budgetary Funds)  
As at the Quarter Ending September 30, 2019

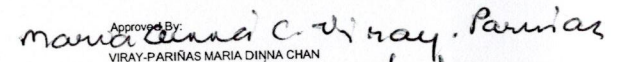

Department: Department of Health (DOH)  
Agency: Office of the Secretary  
Operating Unit: Dr. Jose Rizal Memorial Hospital  
Organization Code: 13 001 1400056  
Fund Cluster: 05 Internally Generated Funds  
(e.g. UACS Fund Cluster: 05-Internally Generated Funds and 06-Business Related Funds)

Department: Department of Health (DOH) Agency: Office of the Secretary Operating Unit: Dr. Jose Rizal Memorial Hospital Organization Code: 13 001 1400056 Fund Cluster: 05 Internally Generated Funds (e.g. UACS Fund Cluster: 05-Internally Generated Funds and 06-Business Related Funds)												Disbursements						Balances	
						Utilizations				Total	1st Quarter Ending March 31	2nd Quarter Ending June 30	3rd Quarter Ending Sept. 30	4th Quarter Ending Dec. 31	TOTAL	Unutilized Budget	Unpaid Obligations (10-15)=(17+18)		
		Approved Budget																	
Particulars	UACS CODE	Approved Budgeted Revenue	Adjustments (Reductions, Modifications/ Augmentations)	Adjusted Budgeted Revenue	1st Quarter Ending March 31	2nd Quarter Ending June 30	3rd Quarter Ending Sept. 30	4th Quarter Ending Dec. 31											
	2	3	4	5=(3+(-4))	6	7	8	9	10=(6+7+8+9)	11	12	13	14	15=(11+12+13+14)	16=(5-10)	17	18		
1																			
	1000000000000000	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
General Administration and Support	1000001000010000	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
General Management and Supervision		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
PS		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Sub-Total, General Administration and Support		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
PS		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
MOOE		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
FinEx (if Applicable)		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
CO		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Operations		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
OO - Access to curative and rehabilitative health care services improved	3000000000000000	114,207,241.83	0.00	114,207,241.83	16,402,720.12	32,539,104.15	16,000,430.84	0.00	64,942,255.11	7,766,351.23	12,012,365.75	22,858,154.25	0.00	42,636,871.23	49,264,986.72	22,305,383.88	0.00		
HEALTH FACILITIES OPERATION PROGRAM	3200000000000000	114,207,241.83	0.00	114,207,241.83	16,402,720.12	32,539,104.15	16,000,430.84	0.00	64,942,255.11	7,766,351.23	12,012,365.75	22,858,154.25	0.00	42,636,871.23	49,264,986.72	22,305,383.88	0.00		
CURATIVE HEALTH CARE SUB-PROGRAM	3201000000000000	114,207,241.83	0.00	114,207,241.83	16,402,720.12	32,539,104.15	16,000,430.84	0.00	64,942,255.11	7,766,351.23	12,012,365.75	22,858,154.25	0.00	42,636,871.23	49,264,986.72	22,305,383.88	0.00		
Operations of DOH Regional Hospitals and Other Health Facilities	3201011000030000	114,207,241.83	0.00	114,207,241.83	16,402,720.12	32,539,104.15	16,000,430.84	0.00	64,942,255.11	7,766,351.23	12,012,365.75	22,858,154.25	0.00	42,636,871.23	49,264,986.72	22,305,383.88	0.00		
MOOE		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
CO		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Sub-Total, Operations		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
PS		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
MOOE		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
FinEx (if Applicable)		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
CO		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
GRAND TOTAL		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
PS		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
MOOE		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
FinEx (if Applicable)		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
CO		0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		

Page 1 of 2

Certified Correct:   
BOLASCO KAREN MARIE NARVAEZ  
Administrative Officer  
Date: 2019-10-08 15:54:49.0

Recommending Approval  
  
RIZAL D. CAGBABANUA  
Administrative Officer V  
Budget Officer  
Date:

Approved By:   
VIRAY-PARIÑAS MARIA DINNA CHAN  
Medical Center Chief  
Date: 2019-10-08 16:39:  10/9/19