

## **ACTIVITY DOCUMENTATION CHECKLIST**

Instruction: Please submit the following documents <u>a week after the last day</u> of your activity.

| Filled out Activity Report |
| Filled out and tallied Evaluation Forms |
| Filled out Liquidation form (to be accomplished by SMO Secretary) |
| Signed liquidation letter |
| Filled out Official Receipt with Tax Identification Number |
| Signed original copy of supplier's quotation |
| Statement of Account |
| Others: \_\_\_\_\_ |
| Others: \_\_\_\_\_ |
| Date Submitted: |
| Received by: |
| Project Head |
| SMO Director / Coordinator |

Signature over printed name / Date

Signature over printed name / Date