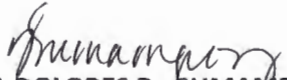
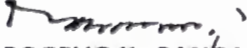


Modified Form A1  
**DETAILS of OFFICE PERFORMANCE REPORT**  
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(1) Name of Agency: **MANOLO FORTICH WATER DISTRICT**

(2) Name of Service		Receiving of Water Bill Payment and other Revenues (With No water bill or Statement of Accounts)		
(3) Responsible Delivery Unit/s/Processing Unit/s		Cash Collection Management Section		
Criteria	Current Status	Target Improvement	Actual Improvement	Remarks
1. Number of Steps	3	0% reduction on the number of steps	none	
2. Transaction Costs Incurred by the Transacting Public/Client				
▪ Fees Paid		0% reduction of fees	none	Amount collected will based on water bill or statement of account presented to the teller
▪ Other Transaction Cost	none	N/A	none	
3. Substantive Compliance Cost	none	N/A	none	
4. Number of Signatures	1	N/A	none	
5. Number of Required Documents	1	N/A	none	Water Bill or Statement of Account
6. Turnaround Time	2 Min. /Payer	N/A	none	
7. Client/Citizen Satisfaction Results				No client satisfaction survey given to clients

Prepare by:   
**MARIA DOLORES D. SUMAMPONG**  
 Cashier D  
 Date: FEB 21 2020

Approved by:   
**Engr. ROGELIO K. PANGAN**  
 General Manager  
 Date: FEB 24 2020