

VISA

Entity Name

Cluster :

101-GF

Date : AUGUST 25, 2022

DV No. :

## DISBURSEMENT VOUCHER

Mode of Payment

☐

MDS Check

☒

Commercial Check

☐

ADA

☐

Others (Please specify)

Payee

Ma. Melissa F. Mendoza

TIN/Employee No.:

ORS/BURS No.:

Address

Baybay City, Leyte

Particulars

Responsibility Center

MFO/PAP

Amount

TO Replenishment of Petty Cash Advance under Fund 101-~~GEN~~ MOOE as per supporting papers hereto attached in the amount of .....

P

2,901.23

FUND : 101-Gen.-MOOE

Amount Due

A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.

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2,901.23

QUEEN-EVER Y. ATUPAN

Sup. Admin. Officer

Printed Name, Designation and Signature of Supervisor

B. Accounting Entry:

Account Title

UACS Code

Debit

Credit

C. Certified:

☐

Cash available

☐

Subject to Authority to Debit Account (when applicable)

☐

Supporting documents complete and amount claimed proper

D. Approved for Payment

Signature

Printed Name

NICK FREDDY R. BELLO

Position

Accountant II

OIC Head, Accounting Unit/Authorized

Date

Signature

Printed Name

EDGARDO E. TULIN

Position

President

Agency Head/Authorized Representative

Date

E. Receipt of Payment

Check/

ADA No. :

Signature :

Ma. Melissa F. Mendoza

Official Receipt No. &amp; Date/Other Documents

Bank Name &amp; Account Number:

LBP BAYBAY

Printed Name:

JEV No.

Date