

 <div style="text-align: center;"> <b>VISAYAS STATE UNIVERSITY</b>  <b>Entity Name</b>  <b>DISBURSEMENT VOUCHER</b> </div>		Fund Cluster :									
		<b>(07) TR</b>									
		Date: 12/14/2021									
		DV No. :									
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)										
Payee	<b>TACLOBAN TAP COMMERCIAL INC.</b>	TIN/Employee No.:	ORS/BURS No.:								
Address	#20-28 F. Gomez St. Brgy. #19 Tacloban City	<b>004-301-284-000</b>	21-06-1219								
Particulars		Responsibility Center	MFO/PAP								
<b>FULL</b> payment for the purchase of supplies/materials per Invoice # <u>8680</u> dated <u>9/17/2021</u> with all the required supporting paper hereto attached in the total amount of ..... Less: 1% GMP: 30.32 5% EWT: <u>151.58</u> <div style="text-align: right;">           Net Sales 3,031.70            Add: 12% VAT 363.80  <b>3,395.50</b> </div>		101T20201050-10.6.22	(07) TR								
			3,395.50								
			181.90								
			<b>3,213.60</b>								
P.O # : GOODS-21-24-086 (TF)			<b>Warranty Security</b>								
PR # : TF-2021-03-00112			<b>LD</b>								
ITEM : OFFICE SUPPLIES			-								
<b>Amount Due</b>			<b>3,213.60</b>								
<b>A.</b> Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.  <div style="text-align: center;"> <b>JESSAMINE C. ECLEO</b>        Head, Office of the Head for Procurement     </div>											
<b>B.</b> Accounting Entry: <table border="1" style="width: 100%;"> <thead> <tr> <th>Account Title</th> <th>UACS Code</th> <th>Debit</th> <th></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Account Title	UACS Code	Debit					
Account Title	UACS Code	Debit									
<b>C. Certified:</b> <input type="checkbox"/> Cash available <input type="checkbox"/> Subject to Authority to Debit Account (when applicable) <input type="checkbox"/> Supporting documents complete and amount claimed proper		<b>D. Approved for Payment</b>									
Signature : Printed Name Position <div style="text-align: center;"> <b>NICK FREDDY R. BELLO</b>        OIC Head, Accounting Unit     </div>		Signature Printed Name <div style="text-align: center;"> <b>EDGARDO E. TULIN</b>        President     </div>									
Date		Date									
<b>E. Receipt of Payment</b>			JEV No.								
Check/ ADA No. :	Date :	Bank Name & Account Number:									
Signature :	Date :	Printed Name:									
TACLOBAN TAP COMMERCIAL INC.			Date								
Official Receipt No. & Date/Other Documents											