	VISAYAS STATE UNIVERSITY **Entity Name** **DISBURSEMENT VOUCHER**	**Fund Cluster :** Trust Fund 17-Jul-23 **DV No. :**

Mode of Payment	☐ MDS Check ☐ Commercial Check ☐ ADA ☐ Others (Please specify)		
Payee	**Ma. Theresa P. Loreto**	TIN/Employee No.:	ORS/BURS No.:
Address	**VSU, Baybay City, Leyte**		

Particulars	Responsibility Center	MFO/PAP	Amount
To replenish Communication expenses in the amount of ₱1,324 as per supporting papers hereto attached....	DA Biotech 20201050-10.79 .1	301000000	**1,324.00**
Amount Due			**1,324.00**

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

ANABELLA B. TULIN
Printed Name, Designation and Signature of Supervisor

B. Accounting Entry:

Account Title	UACS Code	Debit	Credit

C. Certified:		**D. Approved for Payment**	
☐ Cash available ☐ Subject to Authority to Debit Account (when applicable) ☐ Supporting documents complete and amount claimed proper			
Signature		Signature	
Printed Name	**NICK FREDDY R. BELLO**	Printed Name	**EDGARDO E. TULIN**
Position	Head, Accounting Unit/Authorized Representative	Position	Agency Head/Authorized Representative
Date		Date	

E. Receipt of Payment				JEV No.
Check/ ADA No. :		Date :	Bank Name & Account Number:	
Signature :		Date :	Printed Name:	Date
Official Receipt No. & Date/Other Documents				