	Entity Name			Fund Cluster:	
	Date: 12/11/2023 DV No.:				
Mode of Payment	MDS Check Commercial Check	Others (I	Others (Please specify)		
Payee	ODELO B. BALDOS				
ddress	VSU, Visca, Baybay City, Leyte	,	ORS/BURS No.:		
	Particulars	Responsibility			
		Center	MFO/PA	P Amount	
Repleni	ishment of Petty Cash fund as per papers attached	EFARMI.A.III.C		1,986	
Certified	Amount Due Expenses/Cash Advance necessary, lawful and inc			1,986	
	Printed Name, Designation a	ARRIBADO nd Signature of St	Inervisor		
Accounting			ipel visoi		
Accounting	ng Entry: Account Title				
Accounti	ng Entry:	UACS Co		t Credit	
Certified:	ng Entry: Account Title	UACS Co	de Debi	t Credit	
Certified: Cash Subje	Account Title Account Title a available ect to Authority to Debit Account (when applicable) porting documents complete and amount claimed		de Debi	t Credit	
Certified: Cash Subje	Account Title Account Title a available ect to Authority to Debit Account (when applicable) porting documents complete and amount claimed	UACS Co	de Debi	t Credit	
Certified: Cash Subjection Supp prop nature inted ame	Account Title Account Title a available ect to Authority to Debit Account (when applicable) porting documents complete and amount claimed	D. Approved	de Debi	Credit	
Certified: Cash Subjection Supp prop nature inted ame	Account Title Account Title available ect to Authority to Debit Account (when applicable) porting documents complete and amount claimed per NICK FREDDY R. BELLO	D. Approved Signature	de Debi	LESLIE S. TAN President	
Certified: Cash Subjection Supp proproproproproproproproproproproproprop	Account Title Account Title a available ect to Authority to Debit Account (when applicable) porting documents complete and amount claimed per	D. Approved Signature Printed Name Position	de Debi	LESLIE S. TAN	
Certified: Cash Subject Supp proproproproproproproproproproproproprop	Account Title Account Title Account Title Account Title Account Title Account (when applicable) Account (when applicable) Account (when applicable) Accounting documents complete and amount claimed per NICK FREDDY R. BELLO Head, Accounting Unit/Authorized Representative	D. Approved Signature Printed Name	de Debi	LESLIE S. TAN President	
Certified: Cash Subject Supp proproproproproproproproproproproproprop	Account Title Account Title Account Title Account Title Account Title Account (when applicable) Account (when applicable) Account (when applicable) Accounting documents complete and amount claimed per NICK FREDDY R. BELLO Head, Accounting Unit/Authorized Representative	D. Approved Signature Printed Name Position Date	de Debi	LESLIE S. TAN President	
Certified: Cash Subje	Account Title Account Title Account Title Account Title Account Title Account (when applicable) Account (when applicable) Account (when applicable) Accounting documents complete and amount claimed per NICK FREDDY R. BELLO Head, Accounting Unit/Authorized Representative	D. Approved Signature Printed Name Position Date	de Debi for Payment DANIEL Agency Head/A	LESLIE S. TAN President uthorized Representative	

PURCHASE REQUEST

Visayas State University

DEPT./O	FFICE	Eco-FARMI	PR NO.		DATE 12/11/23	
SECTION	V		SAI NO.		DATE	
STOCK NO.	UNIT	ITEM DESCRIPTION	QUANTI TY	UNIT COST	TOTAL COST	
1	pcs	Face Towel	3	25.00	75.00	
2	pcs	Led Bulb	5	95.00	475.00	
3	pcs	Receptacle	5	29.00	145.0	
4	bottle	Zonrox, 1 gal.	1	136.50	136.5	
5	pcs	Albatross, lemon	3	65.75	197.2	
6	pack	Fabric conditioner	1	92.00	92.0	
7	pack	Tissue, 3 ply	1	166.00	166.0	
8	kgs	Gestating feeds	4	34.00	136.0	
9	kgs	Grower feeds	4	36.00	144.0	
10	pcs	Glue stick	10	12.00	120.0	
11	kgs	Tahop	30	10.00	300.0	
		Charged to: EFARMI.A.III.C CERTIFIED as to the availability				
		of P within 45 days period.				
		TOTAL			1,986.7	
PURPOS	SE:	For office and farm use.			1,555.7.	
		REQUESTED BY	AF	APPROVED BY		
SIGNATU		7100				
PRINTED NAME DESIGNATION		ODEIO B. BALDOS D AG. TECH. II. ECO-FARMI		NIEL LESLIE S. TAN OIC President		