	VI	BEST PORTER OF		9	d Cluster :	
	VII.	_				
	Entity Name				Date: March 08, 2023	
DISBURSEMENT VOUCHER						
	DISBURSEMENT VOU	CHEK		DV	vo. :	
Mode of Payment	MIDS Check X Commercial Check	ADA	Other	s (Please specify	r)	
Payee	Ma. Melissa F. Mendoza	TD	l/Emplyee No.:	ORS	BURS No.:	
Address	Baybay City, Leyte					
	Particulars	1	Responsibility MFC		Amount	
Fund- MC amount of	nishment of Petty Cash Advance Under Fund 101- OCE- as per supporting papers hereto attached in to	the			Р 3,771.00	
	Expenses/Cash Advance necessary, lawful and incurred				р 3,771.00	
B. Accounting	Printed Name, Designation and g Entry: Account Title	UACS		Debit	Credit	
C C us. t		D JAnnes	red for Payme	and .		
C. Certified:	a available	D. Approv	red for Payme	TIL.		
Subj	porting documents complete and amount claimed oper					
Signature		Signatur	e			
Printed Name	NICK FREDDY R. BELLO	Printed Na	me	EDGA		
Position	Accountant II OIC Head, Accounting Unit/Authorized	Position	1	Agenc	le le	
Date		Date				
E. Receipt of	Payment					
Check/		Bank Name & Accour				
ADA No.:		LBP BAYBAY Printed Name:			-	
Signature :		Princed Nan	ne:			
	Ma. Melissa F. Mendoza					
Official Rece	ipt No. & Date/Other Documents					