VISAYAS STATE UNIVERSITY Fund Cluster: **Entity Name** STF Date: 02/17/2022 **DISBURSEMENT VOUCHER** DV No.: Mode of x MDS Check ADA Others (Please specify) Commercial Check **Payment** ORS/BURS No.: TIN/Emplyee No.: **VISAYAS STATE UNIVERSITY 101 TRUST** Payee Baybay City, Leyte Address Responsibility MFO/PAP **Particulars** Amount Center To Fund Transfer the amount of THREE THOUSAND 3,000.00 pesos only for payment of VSU ViCARP - Registration Fee. **FUND 164 Amount Due** 3,000.00 A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. QUEEN-EVERY. ATUPAN Printed Name, Designation and Signature of Supervisor B. Accounting Entry: **UACS** Code Account Title Debit Credit D. Approved for Payment C. Certified: Cash available Subject to Authority to Debit Account (when applicable) Supporting documents complete and amount claimed Signature Signature Printed Printed Name Name NICK FREDDY R. BELLO **EDGARDO E. TULIN** President Accountant II Position Position Head, Accounting Unit/Authorized Representative Agency Head/Authorized Representative Date Date

Date :

Bank Name & Account Number:

LBP BAYBAY

Printed Name:

E. Receipt of Payment

Official Receipt No. & Date/Other Documents

Check/

ADA No.:

Signature

JEV No.

Date