NAS ST
LAS.

VISAYAS STATE UNIVERSITY

Entity Name

Fun	d Cluster	
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Trust Fund

VERS	31-Aug-23 DV No. :					
Mode of Payment	MDS Check Comm	nercial Check	ADA [Others (Please	specify)	
Payee	Dhan Stephen P. Mandin		TIN/Employee N	No.:	ORS/BURS No.:	
Address	VSU, Baybay City, Leyte					
Particulars			Responsibility Center	MFO/PAP	Amount	
To replenish Graduation expenses in the amount of ₱2,000.00 as per supporting papers hereto attached		20201050-10.79.1 DA Biotech	301000000	2,000.00		
	Amount Due				2,000.00	
	A N	ANABELLA	B TULIN und Signature of Super	rvisor		
B. Accounti	ng Entry:					
	Account Title		UACS Code	Debit	Credit	
C. Certified			D. Approved t	D. Approved for Payment		
Sut	sh available oject to Authority to Debit Account (w oporting documents complete and amo proper					
Signature	е		Signature		~	
Printed Name	ne 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 Check/ Date:		Bank Name & A	Bank Name & Account Number:			
Signature:	D-4		Printed Name:		Date	