

OBLIGATION REQUEST AND STATUS					Serial No. : _____		
VISAYAS STATE UNIVERSITY					Date : _____		
Entity Name					Fund Cluster : _____		
Payee	MA. ELVIRA V. ISRAEL						
Office	COA - VSU						
Address	Baybay City						
Responsibility Center	Particulars	MFO/PAP	UACS Object Code	Amount			
	Reimbursement of travelling expenses incurred			Php5,650.00			
				Php5,650.00			
A. Certified: Charges to appropriation/alloment are necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal.		B. Certified: Allotment available and obligated for the purpose/adjustment necessary as indicated above					
Signature : _____ Printed Name: FLERIDA RUTH R. QUIMBO Position SA III/ OIC-Audit Team Leader COA- Visayas State University Date : _____		Signature : _____ Printed Name: ALICIA M. FLORES Position : Administrative Officer III OIC-Head, Budget Unit Date : _____					
STATUS OF OBLIGATION							
Reference			Amount				
Date	Particulars	ORS/JEV/Check/ADA/TRA No.	Obligation	Payable	Payment	Balance	
			(a)	(b)	(c)	Not Yet Due (a-b)	Due and Demandable (b-c)