

VISAYAS STATE UNIVERSITY

Appendix 32

Entity Name

Fund Cluster :

DISBURSEMENT VOUCHER #2021-201

Date: Dec.06, 2021
DV No. :

Mode of Payment

☐ MDS Check ☐ Commercial Check ☐ ADA ☐ Others (Please specify)

Payee

Virginia Almilor

Address

VSU Visca Baybay City, Leyte

TIN/Employee No.:

ORS/BURS No.:

Particulars

Payment for fruits
per supporting papers attached
in the amount of - - - - -

Responsibility
Center

VSU Pavilion

MFO/PAP

200010000

Amount

5,752.00

5,752.00

Amount Due

A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.

Josefina M. Larrosa
JOSEFINA M. LARROSA
GHP Manager

B. Accounting Entry:

Account Title

UACS Code

Debit

Credit

C. Certified:

☐ Cash available
☐ Subject to Authority to Debit Account (when applicable)
☐ Supporting documents complete and amount claimed proper

D. Approved for Payment

Signature

Printed Name

NICK FREDDY R. BELLO

Position

OIC HEAD ACCOUNTING

Date

Head, Accounting Unit/Authorized Representative

Signature

Printed Name

EDGARDO E. TULIN

Position

VSU PRESIDENT

Date

Agency Head/Authorized Representative

E. Receipt of Payment

Check/
ADA No. :

Date :

Bank Name & Account Number:

JEV No.

Signature :

VIRGINIA ALMILOR

Date :

Printed Name:

Date

Official Receipt No. & Date/Other Documents