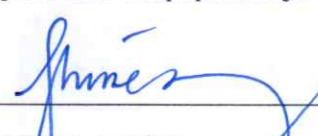


<b>OBLIGATION REQUEST AND STATUS</b>				Serial No. : _____			
VISAYAS STATE UNIVERSITY Entity Name				Date : May 8, 2023			
				Fund Cluster : <u>304000000</u>			
Payee	<b>SALOMA B. GISULGA</b>						
Office	Institute for Strategic Research and Development Studies (ISRDS)						
Address	Visayas State University, Visca, Baybay City, Leyte						
Responsibility Center	Particulars	MFO/PAP	UACS Object Code	Amount			
ISRDS BIDANI	REIMBURSEMENT - travel  X-X-X-X-X-X-X	304000000	50201010 00	320.00			
		Total		320.00			
<b>A.</b>	<b>Certified:</b> Charges to appropriation/allotment are necessary, lawful and under my direct supervision; and supporting documents valid, proper and legal  Signature :  Printed Name: <b>LILIAN B. NUÑEZ</b> Position : Asso. Prof/Director Head, Requesting Office/Authorized Representative Date : _____			<b>B.</b>	<b>Certified:</b> Allotment available and obligated for the purpose/adjustment necessary as indicated above  Signature : _____ Printed Name: <b>ALICIA M. FLORES</b> Position : Admin. Officer V Head, Budget Division/Unit/Authorized Representative Date : _____		
<b>C.</b>	<b>STATUS OF OBLIGATION</b>						
<b>Reference</b>			<b>Amount</b>				
Date	Particulars	ORS/JEV/Check/ADA/TRA No.	Obligation	Payable	Payment	Balance	
						Not Yet Due	Due and Demandable
			(a)	(b)	(c)	(a-b)	(b-c)

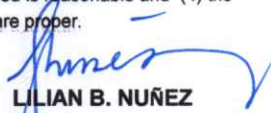
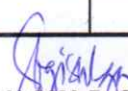
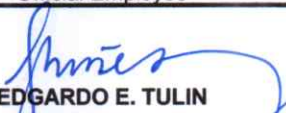
Name: **SALOMA B. GISULGA**

Position: Science Research Specialist Monthly Salary : P 33,949.00

Official Station: BIDANI, ISRDS, VSU, Baybay City, Leyte

Residence: Pangasugan, Baybay City, Leyte

Purpose of Travel: Please see attached travel orders.

Date	Places to be Visited	TIME		EXPENSES			
		Departure	Arrival	Means	Fare	Per Diem/ Incident	Total Amount
16-Mar-23	VSU- Baybay terminal	8:00am	8:30am	PUV	20.00		20.00
	Terminal- Hilongos	8:30am	8:45am	Govt. vehicle			
	Hilongos- Baybay terminal	3:30pm	3:45pm	Govt. vehicle			
	Baybay- VSU	4:00pm	4:30pm	PUV	20.00		20.00
02-May-23	VSU- Baybay terminal	11:00am	11:30am	PUV	20.00		20.00
	Terminal-Convention	11:30am	11:45am	PUV	20.00		20.00
	Convention - terminal	4:30pm	4:45pm	PUV	20.00		20.00
	Baybay- VSU	5:00pm	5:30pm	PUV	20.00		20.00
03-May-23	VSU- Baybay terminal	8:00am	8:30am	PUV	20.00		20.00
	Terminal-Inopacan	8:30am	8:45am	Govt. vehicle			
	Inopacan- Baybay terminal	3:30pm	3:45pm	Govt. vehicle			
	Baybay- VSU	4:00pm	4:30pm	PUV	20.00		20.00
04-May-23	VSU- Baybay terminal	8:00am	8:30am	PUV	20.00		20.00
	Terminal-Convention	8:30am	8:45am	PUV	20.00		20.00
	Convention - terminal	4:30pm	4:45pm	PUV	20.00		20.00
	Baybay- VSU	5:00pm	5:30pm	PUV	20.00		20.00
05-May-23	VSU- Baybay terminal	8:00am	8:30am	PUV	20.00		20.00
	Terminal-Convention	8:30am	8:45am	PUV	20.00		20.00
	Convention - terminal	4:30pm	4:45pm	PUV	20.00		20.00
	Baybay- VSU	5:00pm	5:30pm	PUV	20.00		20.00
<b>TOTAL</b>							<b>320.00</b>
I certify that: (1) I have reviewed the foregoing itinerary, (2) the travel is necessary to the service, (3) the period covered is reasonable and (4) the expenses claimed are proper.  <b>LILIAN B. NUÑEZ</b> BIDANI Program Leader				Prepared by:  <b>SALOMA B. GISULGA</b> Official Employee Approved by:  <b>EDGARDO E. TULIN</b> President			

## CERTIFICATE OF TRAVEL COMPLETED

EDGARDO E. TULIN

Agency Head

VSU, ViSCA

Station

President

(Designation)

May 8, 2023

Date

I CERTIFY THAT I have completed the travel authorized in itinerary of travel No. \_\_\_\_\_, dated May 2-5, March 16, 2023 under conditions indicated below:

- ( ) Strictly in accordance with the approved itinerary  
( ) Cut short as explained below. Excess payment in the amount of P \_\_\_\_\_, was refunded under O.R. No. \_\_\_\_\_ dated \_\_\_\_\_  
( ) Extended as explained below. Additional itinerary was submitted.  
( ) Other deviations as explained below.

Explanation or justifications:

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Evidence of Travel:

- ( ) Used tickets  
(x) Certificate of appearance  
( ) Others - receipts

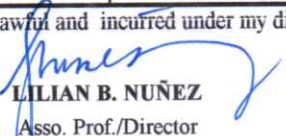
Respectfully submitted:

  
**SALOMA B. GISULGA**  
(Officer or Employee)

On evidence and information of which I have knowledge, the travel was actually undertaken.

  
**LILIAN B. NUÑEZ**  
Supervisor



<b>VISAYAS STATE UNIVERSITY</b> <b>Entity Name</b>				<b>Fund Cluster :</b> 304000000	
<b>DISBURSEMENT VOUCHER</b>				<b>Date : May 8, 2023</b> <b>DV No. :</b>	
<b>Mode of Payment</b>		<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)			
<b>Payee</b>		<b>Saloma B. Gisulga</b>		<b>TIN/Employee No.:</b>	
<b>Address</b>		<b>Visayas State University, Visca, Baybay City, Leyte</b>			
<b>Particulars</b>		<b>Responsibility Center</b>		<b>MFO/PAP</b>	
To. REIMBURSEMENT for travel expenses incurred while on official business outside station as per supporting papers hereto attached in the amount of .....		ISRDS		50201010 00	
<b>Amount Due</b>				<b>320.00</b>	
<b>A. Certified:</b> Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
 <b>LILIAN B. NUÑEZ</b> Asso. Prof./Director Printed Name, Designation and Signature of Supervisor					
<b>B. Accounting Entry:</b>					
<b>Account Title</b>		<b>UACS Code</b>		<b>Debit      Credit</b>	
<b>C. Certified:</b>			<b>D. Approved for Payment</b>		
<input type="checkbox"/> Cash available <input type="checkbox"/> Subject to Authority to Debit Account (when applicable) <input type="checkbox"/> Supporting documents complete and amount claimed proper					
<b>Signature</b>		<b>Signature</b>			
<b>Printed Name</b>		<b>Printed Name</b>			
NICK FREDDY R. BELLO		EDGARDO E. TULIN			
<b>Position</b>		<b>Position</b>			
Accountant II Head, Accounting Unit/Authorized Representative		President Agency Head/Authorized Representative			
<b>Date</b>		<b>Date</b>			
<b>E. Receipt of Payment</b>					<b>JEV No.</b>
Check/ADA No. :		Date :		Bank Name & Account Number:	
Signature :		Date :		Printed Name:	
Official Receipt No. & Date/Other Documents					Date