VISAYAS STATE UNIVERSITY Entity Name DISBURSEMENT VOUCHER					Fund Cluster: 101 T 20401010-105 Date: July 4,2024 DV No.:
Mode of Payment	MDS Check Com	mercial Check	ADA [Others (Please	specify)
Payee	ee Saloma B. Gisulga		TIN/Employee No.:		ORS/BURS No.:
Address	Visayas State University, Visca, B	aybay City, Leyte			
	Particulars	I	Responsibility Center	MFO/PAP	Amount
To. REPLENISHMENT for the purchase of supplies for training/office use as per supporting papers hereto attached in the amount of			ISRDS	50203010 00	3569.1 6
	Amount Due				3,569.16
B. Accounti	Account Title		UACS Code	Debit	Credit
C. Certified:		D. Approved for Payment			
Sut	oject to Authority to Debit Account (v opporting documents complete and am roper				
Signature			Signature		
Printed Name	NICK FREDDY R. BELLO		Printed Name	PROSE IVY G. YEPES	
Position Accountant II			Position	President Agency Head/Authorized Representative	
Date	Head, Accounting Unit/Authorized Representative		Date	Agency Head/Au	inorized Representative
E. Receipt of	of Payment			11/2/2	JEV No.
Check/	Date :		Bank Name & Account Number:		
ADA No. : Signature :	SBGISULGA Date :		Printed Name:		Date
	ript No. & Date/Other Documents				