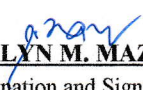
 <div style="text-align: center;"> <b>VISAYAS STATE UNIVERSITY</b>  <b>Entity Name</b>  <b>DISBURSEMENT VOUCHER</b> </div>		<b>Fund Cluster :</b>	
		101 Trust (2020-1050-25)	
		<b>Date : January 21, 2022</b> <b>DV No. :</b>	
<b>Mode of Payment</b>	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)		
<b>Payee</b>	DOST 8-RSTL	<b>TIN/Employee No.:</b>	<b>ORS/BURS No.:</b>
<b>Address</b>	Region Office No. VIII		
<b>Particulars</b>		<b>Responsibility Center</b>	<b>Amount</b>
Payment for Laboratory Analysis (Fecal Coliform)		101 Trust (2020-1050-25)	6,600.00
<b>Amount Due</b>			<b>6,600.00</b>
<b>A.</b> Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.  <div style="text-align: center;">   <b>ANALYN M. MAZO</b>          Printed Name, Designation and Signature of Supervisor       </div>			
<b>B. Accounting Entry:</b>			
<b>Account Title</b>		<b>UACS Code</b>	<b>Debit</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>NICK FREDDY R. BELLO</b>	<b>Printed Name</b>	<b>EDGARDO E. TULIN</b>
<b>Position</b>	Head, Accounting Unit/Authorized Representative	<b>Position</b>	Agency Head/Authorized Representative
<b>Date</b>		<b>Date</b>	
<b>E. Receipt of Payment</b>			<b>JEV No.</b>
<b>Check/ADA No. :</b>	<b>Date :</b>	<b>Bank Name &amp; Account Number:</b>	
<b>Signature :</b>	<b>Date :</b>	<b>Printed Name:</b>	
<b>Official Receipt No. &amp; Date/Other Documents</b>			<b>Date</b>