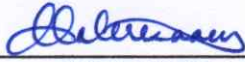


BUDGET UTILIZATION REQUEST AND STATUS					No.: MOOE	
VISAYAS STATE UNIVERSITY Visca, Baybay City, Leyte					Date: October 3, 2022	
					Fund: STF	
Payee:		MARIA TERESA A. CRUZ				
Office:		Office of the Head for Internal Audit				
Address:		Visca, Baybay City, Leyte				
Responsibility Center	Particulars	MFO/PAP	UACS Code / Expenditure	Amount		
	Payment of Pre- Travel expenses and allowances.	100000000	50212990 00	20,541.00		
	attached in the amount					
	Total			20,541.00		
<b>A</b> Certified: Charges to appropriation/ budget necessary, lawful and under my direct supervision and supporting documents valid, proper and legal.				<b>B</b> Certified: Budget available and utilized for the purpose/adjustment necessary as indicated above.		
Signature:  Printed Name: MARIA TERESA A. CRUZ Position: Head, Internal Audit Office Date:				ALICIA M. FLORES OIC, Budget Office Budget Unit/Authorized Representative		
<b>C</b> STATUS OF UTILIZATION						
Reference			Amount			
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable
			20,541.00		20,541.00	
		Totals	20,541.00		20,541.00	

Amount Due					20,541.00
<b>A.</b> Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
ALLEN GLENNIE P. LAMBERT Printed Name, Designation and Signature of Supervisor					
<b>B.</b> Accounting Entry:					
Account Title			UACS Code	Debit	
<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					
Signature Printed Name Position	NICK FREDDY R. BELLO Head, Accounting Unit		Signature Printed Name	EDGARDO E. TULIN President	
Date			Date		
<b>E. Receipt of Payment</b>					JEV No.
Check/ ADA No. :		Date :	Bank Name & Account Number:		
Signature :	MARIA TERESA A. CRUZ	Date :	Printed Name:		Date
Official Receipt No. & Date/Other Documents					