

VISAYAS STATE UNIVERSITY Entity Name DISBURSEMENT VOUCHER				Fund Cluster : GF Date : 9/12/2025 DV No. :	
Mode of Payment <input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)					
Payee		GELBERTO P. VALDEVIESO		TIN/Employee No.:	
Address		VSU, Visca, Baybay City, Leyte			
Particulars		Responsibility Center		MFO/PAP	
Payment for travel (per diem) Amount Due		IEPR		1,050.00	
				1,050.00	
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
MARLON M. TAMBIS Printed Name, Designation and Signature of Supervisor					
B. Accounting Entry:					
Account Title		UACS Code		Debit Credit	
C. Certified:			D. Approved for Payment		
<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					
Head, Accounting Unit/Authorized Representative			President Agency Head/Authorized Representative		
Date			Date		
E. Receipt of Payment					JEV No.
Check/ADA No. :		Date :		Bank Name & Account Number:	
Signature :		Date :		Printed Name:	
Official Receipt No. & Date/Other Documents					