Appendix 32

VISAYAS STATE UNIVERSITY

Entity Name

DISBURSEMENT VOUCHER

Fund Cluster : (05) IGF

Date: 1/4/2022

DV No. :

Mode of Payment	☐ MDS Check ☐ Commercial Check ☐ ADA ☐ Others (Please specify)		
Payee / **Address**	**N.N. ALCALA STORE** **Tres Martires Street, Baybay, Western Leyte**	TIN/Employee No.: **168-331-936-000**	ORS/BURS No.: MOOE 02-206441-2021-11-03053

Particulars	Responsibility Center	MFO/PAP	Amount
FULL payment for the purchase of supplies/materials per Invoice # 5487 dated 12/3/2021 with all the required supporting paper hereto attached in the total amount of	ODPP	301000000	490.00
Less: 1% GMP: 4.38			
5% EWT: 21.88			26.26
Net Sales 437.50			
Add: 12% VAT 52.50			**463.74**
490.00		**Warranty Security**	
P.O # : STF-2021-11-0509			
PR # : STF-2021-11-01498		LD	-
ITEM : OTHER SUPPLIES			
Amount Due			**463.74**

A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.

JESSAMINE C. ECLEO
Head, Office of the Head for Procurement

B. Accounting Entry:

Account Title	UACS Code	Debit	

C. **Certified:**		**D.** **Approved for Payment**	
☐ Cash available ☐ Subject to Authority to Debit Account (when applicable) ☐ Supporting documents complete and amount claimed proper			
Signature		Signature	
Signature Printed Name Position	NICK FREDDY R. BELLO OIC Head, Accounting Unit	Signature Printed Name	EDGARDO E. TULIN President
Date		Date	

E. **Receipt of Payment**				JEV No.
Check/ ADA No. :		Date :	Bank Name & Account Number:	
Signature :	N.N. ALCALA STORE	Date :	Printed Name:	Date
Official Receipt No. & Date/Other Documents				