

DISBURSEMENT VOUCHER


Mode of Payment	<input type="checkbox"/> MDS Check	<input type="checkbox"/> Commercial Check	<input type="checkbox"/> ADA	<input type="checkbox"/> Others (Please specify)
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Payee	VILLABER, DIVINA L.	TIN/Employee No.:	ORS/BURS No.:
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Address	PhilRootcrops, VSU, ViSCA, Baybay City, Leyte
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PARTICULARS	Responsibility Center	MFO/PAP	Amount
<p>To payment of services as Sci. Res. Assistant of 20201050-1.94 during the period from Dec. 1-15, 2020 per supporting papers attached in the amount of</p> <p style="text-align: center;">X-X-X-X-X</p> <p>Total amount – P 14,326.20 Less: PAG-IBIG – 100.00 Net amt. - P 14,226.20</p>	PhilRootcrops 20201050-1.94		14,226.20

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		Signature	
Printed Name	NICK FREDDY R. BELLO	Printed Name	EDGARDO E. TULIN
Position	ACCOUNTANT II Head, Accounting Unit/Authorized Representative	Position	UNIVERSITY PRESIDENT Agency Head/Authorized Representative
Date		Date	

E.I Receipt of Payment	JEV No.	
Check/ ADA No.:	Date:	Bank Name & Account Number:
Signature:	Date:	Printed Name: VILLABER, DIVINA L.
Official Receipt No. & Date/Other Documents		Date

407
11/22/21