


<b>VISAYAS STATE UNIVERSITY</b>				<b>Fund Cluster :</b>	
Entity Name				GF	
<b>DISBURSEMENT VOUCHER</b>				<b>Date : 12/22/21</b>	
				<b>DV No. :</b>	

<b>Mode of Payment</b>	<input checked="" type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)				
<b>Payee</b>	<b>LAND BANK OF THE PHILIPPINES</b>		<b>TIN/Employee No.:</b>	<b>ORS/BURS No.:</b>	
<b>Address</b>	<b>Baybay City, Leyte</b>				

Particulars	Responsibility Center	MFO/PAP	Amount
To Fund Transfer the amount of FIVE HUNDRED THIRTY-TWO THOUSAND NINE HUNDRED FORTY-ONE and 31/100 pesos only under 101 GF for payment of reimbursement/J.O. wages/etc.  FUND 101  <b>BATCH 04021                      Amount Due</b>			P    532,941.31          P <b>532,941.31</b>

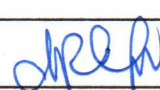
**A.** Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.

  
**QUEEN-EVERY Y. ATUPAN**  
 Printed Name, Designation and Signature of Supervisor

**B.** Accounting Entry:

Account Title	UACS Code	Debit	Credit

<b>C. Certified:</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>D. Approved for Payment</b>          
---	--

Signature:  Printed Name: <b>NICK FREDDY R. BELLO</b> Position: <b>Accountant II</b> Head, Accounting Unit/Authorized Representative Date:	Signature: Printed Name: <b>EDGARDO E. TULIN</b> Position: <b>President</b> Agency Head/Authorized Representative Date:
---	---

<b>E. Receipt of Payment</b>				<b>JEV No.</b>	
Check/ADA No.:			Bank Name & Account Number: LBP BAYBAY		
Signature:		Date:	Printed Name:		
<b>LAND BANK OF THE PHILIPPINES</b>					
Official Receipt No. & Date/Other Documents					