Appendix 32

VISAYAS STATE UNIVERSITY Entity Name DISBURSEMENT VOUCHER				Fund Cluster:	
				Date: Dec.10,2021	
Mode of Payment	MDS Check Commercial C		Others (Ple	ease specify)	
Payee	VSU Pavilion	TIN/Employee No. ORS/BURS No.			
Address	VSU Visca Baybay City, Leyte				
	Paticulars	Responsibility	MFO/PAP	Amount	
Payment	for snacks per supporting papers attached in the amount of	101T20201050- 10.13.43		1,050.00	
	Amount Due			1,050.00	
A. Certifie	ed: Expenses/Cash Advance necessary, lawfi	ul and incurred under my	direct supervision	n.	
B. Accounting Entry: Account Title		UACS Code	Debit	Credit	
	Account Title	OACS COUE	Deoit	Credit	
C. Certifi	ed:	D. Approved	D. Approved for Payment		
Cash Available Subject to Authorithy to Debit Account (when applicable) Supporting documents complete and amount claimed proper					
Signature		Signature			
Printed Name	NICK FREDDY R. BELLO	Printed Name	EDGARDO E. TULIN		
Position	ACCOUNTANT Head, Accounting Unit/Authorized Representativ	Position	UNIVERSITY PRESIDENT Agency Head/Authorized Representative		
DATE		DATE			
E. Receipt Payment			JEV No.		
Check/ ADA No.:	Date:	Bank Name & Accoun	t Number		
Signature:	VSU PAVILION Date:	Printed Name:	Date:		
Official Pa	point No. & Data/Other Documents				