

VISAYAS STATE UNIVERSITY Entity Name			Fund Cluster :		
DISBURSEMENT VOUCHER			Date : 4/18/2024 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.:	ORS/BURS No.:	
Address	VSU, Visca, Baybay City, Leyte				
Particulars		Responsibility Center	MFO/PAP	Amount	
Payment for travel (per diem) to Isabel, Leyte on April 5, 2024		RPOA.III.C		600.00	
Amount Due				600.00	
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. <div style="text-align: center;"> <u>IVY C. EMNACE</u> Printed Name, Designation and Signature of Supervisor </div>					
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	PROSE IVY G. YEPES	
Position	Head, Accounting Unit/Authorized Representative		Position	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:		Date
Official Receipt No. & Date/Other Documents					