

 <b>VISAYAS STATE UNIVERSITY</b> Entity Name <b>DISBURSEMENT VOUCHER</b>		Fund Cluster :	
		<b>(07) TR</b> Date: 1/4/2022 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	<b>KZ ANIEDARL TRANSPORT</b>	TIN/Employee No.:	ORS/BURS No.:
Address	Tawid, Maasin City Southern Leyte	<b>244-166-658-004</b>	21-12-2320
Particulars		Responsibility Center	MFO/PAP
<b>FULL</b> payment for the purchase of supplies/materials per Invoice # <u>0062</u> dated <u>12/15/2021</u> with all the required supporting paper hereto attached in the total amount of .....  <div style="text-align: right;">           Less: 2% GMP:        3,540.00            1% EWT:            <u>1,770.00</u> </div>		101T20201050-50	(07) TR
			177,000.00
			5,310.00
			-
Amount Due			<b>171,690.00</b>
<b>A.</b> Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.  <div style="text-align: center;"> <b>JESSAMINE C. ECLEO</b>            Printed Name, Designation and Signature of Supervisor         </div>			
<b>B.</b> Accounting Entry:			
Account Title		UACS Code	Debit
<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		Signature	
Signature Printed Name Position	<b>NICK FREDDY R. BELLO</b> OIC Head, Accounting Unit	Signature Printed Name	<b>EDGARDO E. TULIN</b> President
Date		Date	
<b>E. Receipt of Payment</b>			JEV No.
Check/ ADA No. :		Date :	Bank Name & Account Number:
Signature :	KZ ANIEDARL TRANSPORT	Date :	Printed Name:
Official Receipt No. & Date/Other Documents			Date