

# GET UTILIZATION REQUEST AND STATUS

## VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

No.:

Date: July 8, 2022

Fund:

Payee:	PASTOR P. GARCIA			
Office:	GISSU			
Address:	VSU, Visca, Baybay City Leyte, Leyte			
Responsibility Center	Particulars	MFO/PAP	UACS Code/ Expenditure	Amount
EFARM.I.A.III.C	PETTY CASH ADVANCE for the purchase of supplies/materials as per papers attached amounting to..	100000000	5020	P 5,000.00
TOTAL				P 5,000.00

<b>A</b> Certified: Charges to appropriation/allotment necessary, lawful and under my direct supervision and supporting documents valid, proper and legal  Signature Printed Name <u>PASTOR P. GARCIA</u> Position <u>HEAD</u> Date <u>July 8, 2022</u>	<b>B</b> Certified: Allotment available and obligated for the purpose/adjustment necessary as indicated above  Signature Printed Name <u>ALICIA M. FLORES</u> Position <u>Administrative Officer</u> <u>Head, Budget Unit/Authorized Representative</u> Date
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C STATUS OF OBLIGATION						
Reference			Amount			
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable
	Obligations		P 5,000.00		P 5,000.00	
	TOTALS		P 5,000.00		P 5,000.00	

<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  SIGNATURE PRINTED NAME <u>NICK FREDDY R. BELLO</u> POSITION <u>OIC, HEAD of Accounting Office</u> <small>(Head, Accounting Unit/Authorized Representative)</small> DATE	<b>D APPROVED FOR PAYMENT:</b>  SIGNATURE PRINTED NAME <u>EDGARDO E. TULIN</u> POSITION <u>President</u> <small>(Agency Head/Authorized Representative)</small> DATE		
<b>E RECEIPT OF PAYMENT:</b>			
CHECK / ADA NO.:	DATE:	BANK NAME & ACCOUNT NUMBER:	JEV NO.
SIGNATURE: <u>PASTOR P. GARCIA</u>	DATE:	PRINTED NAME:	DATE:
OFFICIAL RECEIPT NO. & DATE/OTHER DOCUMENTS:			