

OBLIGATION REQUEST AND STATUS				No.: MOOE 02-101101-2021-12		
VISAYAS STATE UNIVERSITY				Date: December 27, 2021		
Visca, Baybay City, Leyte				Fund: RCCRDC.OC.2021		
Payee:	NOLITO RABANOS					
Office:	HELVMU/GSD					
Address:	VSU, Visca, Baybay City, Leyte					
Responsibility Center	Particulars	MFO/PAP	UACS Code / Expenditure	Amount		
RCCRDC	Per diem (Overtime)	303000000	50201010 00	2070.00		
Total				2,070.00		
A Certified: Charges to appropriation/allotment necessary, lawful and under my direct supervision and supporting documents valid, proper and legal Signature _____ Printed Name EDUARDO O. MANGAOANG Position Director, RCCRDC Date _____			B Certified: Allotment available and obligated for the purpose/adjustment necessary as indicated above Signature _____ Printed Name ALICIA M. FLORES Position Admin. Officer III Head, Budget Unit/Authorized Representative Date _____			
C STATUS OF OBLIGATION						
Reference			Amount			
Date	Particulars	ORS/JEV/RCI/RADAI No.	Obligation	Payment	Not Yet Due	Due and Demandable
		02-101101-2021-12	2070.00		2070.00	
Totals			2070.00		2070.00	

INSTRUCTIONS: Drivers shall fill in this part properly. Drivers are accountable for and are responsible for reporting any vehicle damage, defects and accidents immediately

Trip Ticket Issued/Received	Vehicle Condition (Before Travel)	Fuel & Lubricant Issued/Used	Departure/Time Out	Odometer/Mileage Out
			4:00 - 6:00 7:00 - 9:00	10484
Date Returned	Vehicle Condition (After Travel)	Fuel & Lubricant Balanced	Arrival/Time In	Odometer/Mileage In
			3:00 - 5:00 5:00 - 7:00	10448

Was the passenger/s following the call time & location?	Was there any purchased of fuel/lubricant outside VSU Campus?	Was the vehicle involved in accident or damaged while in your custody?	Was the vehicle used other than official government business?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes (Specify) <input type="checkbox"/> No	<input type="checkbox"/> Yes (Specify) <input type="checkbox"/> No	<input type="checkbox"/> Yes (Specify) <input type="checkbox"/> No

Driver's Name & Signature This vehicle will be used for official government business only. I have reviewed and complied with rules & regulations regarding the use of Government-Owned Vehicle. 	Filled in by the Head of Party or Requesting Party
SERVICE SATISFACTION <input type="checkbox"/> 1. Not Satisfied <input type="checkbox"/> 2. Slightly Satisfied <input type="checkbox"/> 3. Moderately Satisfied <input type="checkbox"/> 4. Very Satisfied <input type="checkbox"/> 5. Extremely Satisfied	DRIVER'S OVER ALL RATING <input type="checkbox"/> 1. - Poor <input type="checkbox"/> 2. - Fair <input checked="" type="checkbox"/> 3. - Good <input type="checkbox"/> 4. - Very Good <input type="checkbox"/> 5. - Excellent Comments & Suggestions
SIGNATURE OVER PRINTED NAME	Name and Signature



VISAYAS

STATE UNIVERSITY



OFFICE OF THE DIRECTOR FOR PHYSICAL PLANT

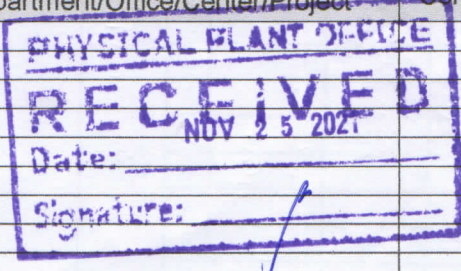
Visca, Baybay City, Leyte, PHILIPPINES
 Telefax: 1041(LOCAL)
 Email: www.ppo.@vsu.edu.ph
 Website: www.vsu.edu.ph

TRIP TICKET

000953


Date Filed : Nov 24, 2021 Trip Number :
 Scheduled Travel : Nov 27, 2021 Destination : Tacloban City
 Date/s :
 Departure Time : 4:00 AM Driver will report to :
 Purpose : To fetch & conduct Antoinette Taus CORA Executive Director & Staff to visit CORA project Site in Baybay City

Head of Party: RENE JEMMAR G. ALKUINO

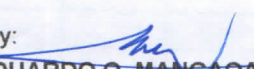
Passengers	Department/Office/Center/Project	Contact Number(s)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

*For more than (10) passengers, use separate sheet.

Vehicle Type: RCCRDC TOYOTA HILUX
 Vehicle Plate No.: AU1296

Requesting party: 
EDUARDO O. MANGAOANG
 Professor, Director, Project leader


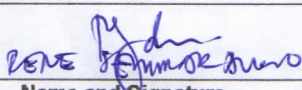
Dispatched by: 
MARLON G. BURLAS
 Motor Pool Services Head

Approved by: 
EDUARDO O. MANGAOANG
 (Director/Center Director/Agency Head)

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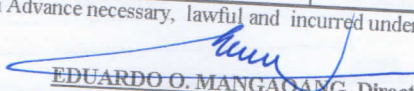
Trip Ticket Issued/Received	Vehicle Condition (Before Travel)	Fuel & Lubricant Issued/Used	Departure/Time Out	Odometer/Mileage Out
			4:00 - 6:00	10484
Date Returned	Vehicle Condition (After Travel)	Fuel & Lubricant Balanced	Arrival/Time In	Odometer/Mileage In
			3:00 - 5:00	10488

Was the passenger/s following the call time & location? ☐ Yes ☐ No
 Was there any purchased of fuel/lubricant outside VSU Campus? ☐ Yes (Specify) ☐ No
 Was the vehicle involved in accident or damaged while in your custody? ☐ Yes (Specify) ☐ No
 Was the vehicle used other than official government business? ☐ Yes (Specify) ☐ No

Driver's Name & Signature		Filled in by the Head of Party or Requesting Party	
This vehicle will be used for official government business only. I have reviewed and complied with rules & regulations regarding the use of Government-Owned Vehicle.	Service Satisfaction <input type="checkbox"/> 1. Not Satisfied <input type="checkbox"/> 2. Slightly Satisfied <input type="checkbox"/> 3. Moderately Satisfied <input type="checkbox"/> 4. Very Satisfied <input type="checkbox"/> 5. Extremely Satisfied	Driver's OVER ALL RATING <input type="checkbox"/> 1. - Poor <input type="checkbox"/> 2. - Fair <input checked="" type="checkbox"/> 3. - Good <input type="checkbox"/> 4. - Very Good <input type="checkbox"/> 5. - Excellent	
	Comments & Suggestions		
 SIGNATURE OVER PRINTED NAME		 Name and Signature	

Vision:
Mission:

A globally competitive university for science, technology, and environmental conservation.
 Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.

 VISAYAS STATE UNIVERSITY Visca, Baybay City, Leyte, Philippines		Fund Cluster : RCCRDC.OC.2021 Date :12/27/2021 DV No. :	
DISBURSEMENT VOUCHER			
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)		
Payee	NOLITO RABANOS	TIN/Employee No.:	ORS/BURS No.:
Address	Visayas State University, Visca, Baybay, Leyte		
Particulars	Responsibility Center	MFO/PAP	Amount
To payment of per diem(overtime) as per supporting documents hereto attached in total amount of . . .	RCCRDC	303000000	2,070.00
Amount Due			2,070.00
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.  EDUARDO O. MANGAOANG, Director (RCCRDC) Printed Name, Designation and Signature of Supervisor			
B. Accounting Entry:			
Account Title	UACS Code	Debit	Credit
	50201010 00		
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	EDGARDO E. TULIN
Position	Admin. Officer V Head, Accounting Unit/Authorized Representative	Position	President Agency Head/Authorized Representative
Date		Date	
E. Receipt of Payment			
Check/ADA No. :	Date :	Bank Name & Account Number:	JEV No.
Signature :	Date :	Printed Name: NOLITO RABANOS	Date
Official Receipt No. & Date/Other Documents			