| OBLIGATION REQUEST AND STATUS VISAYAS STATE UNIVERSITY |  |                             |                                 | No.:                                      |                            |                       |
|--|--|-----------------------------|---------------------------------|---|----------------------------|-----------------------|
|  |  |                             |                                 | Date:                                     | February 8, 2022           |                       |
|  | Visca,   |                             | Fund:                           |   |                            |                       |
| Payee:   | PETER BEN LAUR                                   |                             |                                 |   |                            |                       |
| Office:  | CASH DIVISION                                    |                             |                                 |   |                            |                       |
| Address:   | VSU, BAYBAY CIT                                  | Y, LEYTE                    |                                 |   |                            |                       |
| Responsibility<br>Center                               | Particulars                                      |                             |                                 | MFO/PAP                                   | UACS Code /<br>Expenditure | Amount                |
|  | Reimbursement of t                               | ravel                       |                                 | 100000000                                 | 5020101010                 | 450.00                |
|  |  |                             | Total                           |   |                            | 450.00                |
| Certified:   | Charges to approprati                            | on/allotment                | Certified:                      | Allotment available and obligated for the |                            |                       |
|  |  | under my direct supervision | purpose/adjustment necessary as |   |                            |                       |
|  | and supporting documents valid, proper and legal |                             | indicated above                 |   |                            |                       |
| Signature  |  |                             | Signature                       |   |                            |                       |
| Printed Name   | QUEEN-EVER Y. ATUPAN                             |                             | Printed Name                    | ALICIA M. FLORES                          |                            |                       |
| Position   | Sup. Admin Officer                               |                             | Position                        | Admin. Officer IV                         |                            |                       |
|  |  |                             | 1                               |   |                            |                       |
| Date   |  |                             | Date                            |   |                            |                       |
|  |  |                             | IS OF OBLIGAT                   | ION                                       |                            |                       |
| Reference  |  |                             | Amount                          |   |                            |                       |
| Date   | Particulars                                      | ORS/JEV/RCI/RADAI No.       | Obligation                      | Payment                                   | Not Yet Due                | Due and<br>Demandable |
|  | OBLIGATION                                       | 0                           | 450.00                          |   | 450.00                     |                       |
|  |  | Total                       | 450.00                          |   | 450.00                     |                       |