LIQUIDATION REPORT	No.	
VISAYAS STATE UNIVERSITY Agency		
g-11.7y	Page Au	gust 1, 2024
	Responsi	bility Center Code
ISRAEL C. EMBAYARTE PARTICULARS		
Van		AMOUNT
Tricycle		
Multicab		600.00
Per diem		50.00
	1	360.00
	- 1	300,00
TOTAL		
OTAL AMOUNT SPENT		
MOUNT OF CASH ADVANCE BED DAVAGE		1,075,00
MOUNT REFLINDED BED OF THE		
MOUNT TO BE REIMBURSED		
D.		
Certified: Correctness of the Certified: Purpose of travel/	C Certifi	1,075.00
above data cash advance duly accomplished	Certin	ed: Supporting documents
		complete and proper
ISDADI G DI	1	
ISRAEL C. EMBAYARTE Claimant ZYRAMAY H. CENTINO		
Claimant Immediate Supervisor	NICK FREDDY R. BELLO JEV N	
F-W-1301	Head, Ad	ecounting Unit