

	<b>VISAYAS STATE UNIVERSITY</b> Entity Name			<b>Fund Cluster :</b> <b>(05) IGF</b>	
	<b>DISBURSEMENT VOUCHER</b>			Date: 12/6/2021	
				<b>DV No. :</b>	
<b>Mode of Payment</b>	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)				
<b>Payee</b>	<b>BAYBAY PRINTSHOP</b>		<b>TIN/Employee No.:</b> <b>183-801-468-003</b>		<b>ORS/BURS No.:</b> CO 06-206441- 2021-08-01839a
<b>Address</b>	<b>R. Magsaysay Avenue, Baybay City</b>				
<b>Particulars</b>			<b>Responsibility Center</b>	<b>MFO/PAP</b>	<b>Amount</b>
<b>FULL</b> payment for the purchase of supplies/materials per Invoice # <u>1444;1429;1436</u> dated <u>10/14/2021</u> with all the required supporting paper hereto attached in the total amount of .....  Less: 1% GMP: 1,140.09 5% EWT: <u>5,700.45</u>  <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right;">Net Sales 114,008.93</div> <div style="text-align: right;">Add: 12% VAT 13,681.07</div> <div style="text-align: right; border-top: 1px solid black; border-bottom: 1px solid black;">127,690.00</div> </div>			VARIOUS	VARIOUS	127,690.00
				6,840.54	
				<b>120,849.46</b>	
				<b>1,208.49</b>	
				-	
<b>Amount Due</b>					<b>119,640.97</b>
<b>A.</b> Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
<b>JESSAMINE C. ECLEO</b> Printed Name, Designation and Signature of Supervisor					
<b>B.</b> Accounting Entry:					
Account Title			UACS Code	Debit	
<b>C. Certified:</b>			<b>D. Approved for Payment</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					
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>					<b>JEV No.</b>
Check/ ADA No. :		Date :	Bank Name & Account Number:		
Signature :	BAYBAY PRINTSHOP	Date :	Printed Name:		Date
Official Receipt No. & Date/Other Documents					