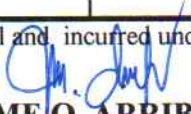


Entity Name DISBURSEMENT VOUCHER				Fund Cluster : Date : 11/22/2023 DV No. :	
Mode of Payment <input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)					
Payee ODELO B. BALDOS			TIN/Employee No.:		ORS/BURS No.:
Address VSU, Visca, Baybay City, Leyte					
Particulars			Responsibility Center	MFO/PAP	Amount
Replenishment of Petty Cash fund as per papers attached...			EFARMI.A.III.C		4,975.00
Amount Due					4,975.00
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. <div style="text-align: center;">  JEROME O. ARRIBADO Printed Name, Designation and Signature of Supervisor </div>					
B. Accounting Entry:					
Account Title			UACS Code	Debit	Credit
C. Certified: <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			D. Approved for Payment		
Signature			Signature		
Printed Name NICK FREDDY R. BELLO			Printed Name DANIEL LESLIE S. TAN		
Position Head, Accounting Unit/Authorized Representative			Position President Agency Head/Authorized Representative		
Date			Date		
E. Receipt of Payment					JEV No.
Check/ADA No. :		Date :	Bank Name & Account Number:		
Signature :		Date :	Printed Name:		
Official Receipt No. & Date/Other Documents					