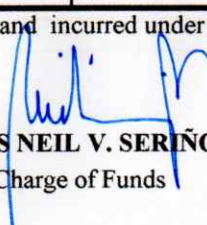


<b>VISAYAS STATE UNIVERSITY</b> Entity Name				Fund Cluster :  ..... DV No. :	
DISBURSEMENT VOUCHER					
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)				
Payee	VSU-ViCARP		TIN/Employee No.:		ORS/BURS No.:
Address	VSU, Visca, Baybay City, Leyte				
Particulars			Responsibility Center	MFO/PAP	Amount
Payment for the Registration Fee of two project Staff joining 33 <sup>rd</sup> Regional RDE Symposium via Zoom per supporting papers attached in the amount of .....			20201050-1.86		2,000.00
Amount Due					2,000.00
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.  <div style="text-align: center;">   <b>MOISES NEIL V. SERINO</b>          In-Charge of Funds       </div>					
B. Accounting Entry:					
Account Title			UACS Code	Debit	Credit
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	<b>ERLINDA S. ESGUERRA</b>		Printed Name	<b>EDGARDO E. TULIN</b>	
Position	Head, Accounting Unit/Authorized Representative		Position	University President	
Date			Date		
E. Receipt of Payment					JEV No.
Check/ADA No. :		Date :	Bank Name & Account Number:		
Signature :	VSU-ViCARP	Date :	Printed Name:		Date
Official Receipt No. & Date/Other Documents					