

 <b>VISAYAS STATE UNIVERSITY</b> Entity Name		Fund Cluster : <b>(01) RAF</b> Date: 12/6/2021 DV No. :	
<b>DISBURSEMENT VOUCHER</b>			
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)		
Payee Address	<b>HEATHER PLUS HOME FURNISHING ENTERPRISES</b> Brgy. 91, Abucay, Tacloban City	TIN/Employee No.: <b>166-548-374-001</b>	ORS/BURS No.: MOOE 02-101101-2021-06-02842
Particulars		Responsibility Center	MFO/PAP
<b>FULL</b> payment for the purchase of supplies/materials per Invoice # <u>3386</u> dated <u>8/16/2021</u> with all the required supporting paper hereto attached in the total amount of .....  Less: 1% GMP:    1,955.36 5% EWT: <u>9,776.79</u>  <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right;">Net Sales            195,535.71</div> <div style="text-align: right;">Add: 12% VAT            23,464.29</div> <div style="border-top: 1px solid black; text-align: right; width: 100px;">219,000.00</div> </div>		VARIOUS	VARIOUS
			219,000.00
			11,732.15
			<b>207,267.85</b>
			<b>2,190.00</b>
P.O # : GOODS21-15-063 (GF) PR # : ASSORTED PR's ITEM : FURNITURE			<b>Warranty Security</b>
			<b>LD</b>
<b>Amount Due</b>			<b>205,077.85</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 Date	NICK FREDDY R. BELLO OIC Head, Accounting Unit	Signature Printed Name Date	EDGARDO E. TULIN President
<b>E. Receipt of Payment</b>			JEV No.
Check/ ADA No. :	Date :	Bank Name & Account Number:	
Signature :	HEATHER PLUS HOME FURNISHING ENTERPRISES	Date :	Printed Name:
Official Receipt No. & Date/Other Documents			Date