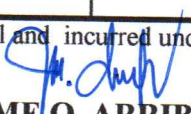


Entity Name DISBURSEMENT VOUCHER				Fund Cluster : Date : '8/1/2023 DV No. :				
Mode of Payment	<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)							
Payee	DHENBER C. LUSANTA		TIN/Employee No.:	ORS/BURS No.:				
Address	VSU, Visca, Baybay City, Leyte							
Particulars			Responsibility Center	MFO/PAP	Amount			
Replenishment of Petty Cash fund as per papers attached...			TP.UF.009		4,983.00			
Amount Due					4,983.00			
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.								
 JEROME O. ARRIBADO Printed Name, Designation and Signature of Supervisor								
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	NICK FREDDY R. BELLO					Printed Name	EDGARDO E. TULIN	
Position	Head, Accounting Unit/Authorized Representative					Position	President	
Date			Date					
E. Receipt of Payment								
Check/ADA No. :			Date :	Bank Name & Account Number:				
Signature :			Date :	Printed Name:				
Official Receipt No. & Date/Other Documents				JEV No.				
				Date				