BUDGET UTILIZATION REQUEST AND S VISAYAS STATE UNIVERSITY Entity Name					TATUS	8	Serial No. :				
Payee RANDY G. OMEGA				. <u>L</u> j. 64							
C	Office	Department of Tourism and Hospitality Management (DTHM)									
A	ddress	Visayas	State University, Visca,	Leyte		,					
Responsibility Center		Particulars			MFO/PAP		UACS Object Code/ Expenditures	Am	ount		
ISRDS-BIDANI		To CASH ADVANCE for travel expenses incurred in attending the BIDANI Network National Convention at Umali Auditorium, SEARCA, UPLB, Laguna on July 11-15, 2023 as per supporting papers hereto attached in the amount of		STF- Extension				21,460.00			
			Total		_				21,460.00		
lawful and under my direct supervision; and supporting documents valid, proper and legal						B. Certified: Budget available and utilized for the purpose/adjustment necessary as indicated above Signature :					
Printed Name: MOISES NEIL V. SERIÑO				Printed N	Vame:	ALICIA M. FLORES					
			Position		Admin. Officer V						
Head, Requesting Office/Authorized Representation Date :			Representative	1		Head, Budget Division/Unit/Authorized Representative					
C.		STATUS OF UTILIZATION									
Reference				Amount							
Date	Particu	llars	BURS/JEV/RCI/ RADAI/RTRAI No.	Utilization (a)	Payal (b)		Payment (c)	Bal Not Yet Due (a-b)	Due and Demandable (b-c)		

ITINERARY OF TRAVEL

Entity Name: VISAYAS STATE UNIVERSITY

Fund Cluster: STF-Extension

No.: _____

Name: RANDY G. OMEGA
Position: BIDA Project Leader
Official Station: DTHM

Date of Travel: JULY 11-15, 2023

Purpose of Travel: <u>To attend the BIDANI Network National</u> <u>Convention at Umali Auditorium, SEARCA, UPLB, Laguna</u>

Official Station . D I HM				Convention at omail Additionally, SEARCA, OPLB, Laguna				
D-4-	Places to be visited	TIME		Means of	Transpor-	Per	Others	
Date	(Destination)	Departure	Arrival	Transportation	station	Diem	Otners	Total Amount
July 11, 2023	VSU to Tac. Airport Tac. Airport-Mla. Airport	8:00AM 12:30PM	10:00AM 1:30PM	CV Plane	<u>L</u> ey			11,000.00
	Mla. Airport-Bus Terminal	2:30PM	3:00PM	(Round Trip) Taxi	300	4 000 00		76.
July12, 2023	Bus Terminal-UPLB Convention (SEARCA)	3:00PM 8:00AM	4:00PM 5:00 PM	Bus	200	1,980.00 2,200.00		2,480.00 2,200.00
July 13, 2023	Convention (SEARCA)	8:00AM	5:00PM			2,200.00		2,200.00
July 14, 2023	UPLB-Bus Terminal,Mla MlaBus Terminal-Pasay at Visca Manila Office	2:00PM 4:00PM	4:00PM 5:00PM	Bus Taxi	300 200	2,200.00		2,700.00
July 15, 2023	VMO Pasay-Mla. Airport Mla. Airport-Tac. Airport Tac. Airport-VSU	9:00AM 11:00AM 1:00P.M.	10:00AM 12:00P.M	Taxi Plane	300	880.00		880.00
	x-x-x-x-							21,460.00
						,		

I certify that: (1) I have reviewed the foregoing itinerary, (2) the travel is necessary to the service, (3) the period covered is reasonable and (4) the

Prepared by :

TOTAL

21,460.00

period covered is reasonable and (4) the expenses claimed are proper.

RANDY G. OMEGA

Signature over Printed Name

Approved by:

HANNAH MAE E. QUIMBO

Signature over Printed Name Immediate Supervisor EDGARDO E. TULIN

Signature over Printed Name Agency Head/Authorized Representative

	Fund Cluster : STF								
	Date : June 13, 2023 DV No. :								
Mode of Payment	MDS Check Com	mercial Check	ADA	Others (Please	specify)				
Payee	Randy G. Omega	TIN/Employee	No.:	ORS/BURS No.:					
Address Visayas State University, Visca, Baybay City, Leyte									
	Particulars		Responsibility Center	MFO/PAP	Amount				
in attending at Umali Aud 11-15, 2023	ADVANCE for travel expenses inc the BIDANI Network National Co- ditorium, SEARCA, UPLB, Laguna as per supporting papers hereto nt of	ISRDS	STF-Extension	21,460.00					
	Amount Due				21,460.00				
MOISES NEIL V. SERIÑO Dean, CME Printed Name, Designation and Signature of Supervisor									
B. Accounting									
	Account Title		UACS Code	e Debit	Credit				
C. Certified:			D. Approved for Payment						
Cash available Subject to Authority to Debit Account (when applicable) Supporting documents complete and amount claimed proper									
Signature			Signature						
Printed Name	NICK FREDDY R. B	Printed Name	EDGARDO E. TULIN						
Position	Accountant II	Position	President						
	Head, Accounting Unit/Authorize	Toblical	Agency Head/Authorized Representative						
Date			Date						
E. Receipt o	f Payment	Bank Name &	Account Number:	JEV No.					
ADA No. :									
Signature :	RGOMEGA pt No. & Date/Other Documents	Printed Name:		Date					