

		VISAYAS STATE UNIVERSITY Entity Name		Fund Cluster : (07) TR								
		DISBURSEMENT VOUCHER		Date: 12/28/2021 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	YANA CHEMODITIES, INC.		TIN/Employee No.: 003-584-182-000	ORS/BURS No.: 21-07-1274								
Address	Mandaue Rec. Area, 2nd St. After Quano Avenue, Mandaue											
Particulars	Responsibility Center	MFO/PAP	Amount									
FULL payment for the purchase of supplies/materials per Invoice # <u>99207</u> dated <u>10/26/2021</u> with all the required supporting paper hereto attached in the total amount of <div style="margin-left: 100px;"> Less: 1% GMP: 6.43 5% EWT: 32.14 <hr style="width: 100px; margin-left: 100px;"/> Net Sales 642.86 Add: 12% VAT 77.14 <hr style="width: 100px; margin-left: 100px;"/> <div style="text-align: right;">720.00</div> </div>	101T20201050-1.95	(07) TR	720.00									
P.O #: GOODS-21-25-120 (TF)		Warranty Security										
PR #: TF-2021-02-00015												
ITEM: LAB. SUPPLIES												
Amount Due			681.43									
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. <div style="text-align: center;"> JESSAMINE C. ECLEO Head, Office of the Head for Procurement </div>												
B. Accounting Entry: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Account Title</th> <th style="width: 15%;">UACS Code</th> <th style="width: 15%;">Debit</th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>					Account Title	UACS Code	Debit					
Account Title	UACS Code	Debit										
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 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Signature : Printed Name Position</td> <td style="width: 30%; text-align: center;">NICK FREDDY R. BELLO OIC Head, Accounting Unit</td> <td style="width: 30%;">Signature Printed Name</td> <td style="width: 10%; text-align: center;">EDGARDO E. TULIN President</td> </tr> <tr> <td>Date</td> <td> </td> <td>Date</td> <td> </td> </tr> </table>			Signature : Printed Name Position	NICK FREDDY R. BELLO OIC Head, Accounting Unit	Signature Printed Name	EDGARDO E. TULIN President	Date		Date	
Signature : Printed Name Position	NICK FREDDY R. BELLO OIC Head, Accounting Unit	Signature Printed Name	EDGARDO E. TULIN President									
Date		Date										
E. Receipt of Payment				JEV No.								
Check/ ADA No. :		Date :	Bank Name & Account Number:									
Signature :	YANA CHEMODITIES, INC.	Date :	Printed Name:									
Official Receipt No. & Date/Other Documents												