Appendix 32

SAYAS STATE UNIVERSITY

Entity Name

DISBURSEMENT VOUCHER

Fund Cluster:

Date:June 20,2022 DV No. :

Mode of Payment	MDS Check C	ommercial Check	ADA	Others (Plea	se specify)	
Payee	VSU Pavilion	1	TIN/Employee No.:		ORS/BURS No.:	
Address	VSU Visca Baybay City, Leyte					
Particulars			Responsibility	MFO/PAP	Amount	
Payment for meals			Center			
per supporting papers attached						
in the amount of			ROTC Funds		7,500.	
Amount Due A. Certified: Expenses/Cash Advance necessary, lawful and incu					7,500.	
B. Accounti	Chromosophic of the Commission	Head, NSTI				
rest that super-horizontal estimation is	Account Title		UACS Cod	e Debit	Credit	
C. Certified:			D. Approved for Payment			
Subj	ect to Authority to Debit Account (voorting documents complete and amore					
Signature			Signature		-	
Printed Name	NICK FREDDY R. BELLO		Printed Name	EDGARDO E. TULIN		
Position	OIC HEAD ACCOUNTING		Position	VSU PRESIDENT		
	Head, Accounting Unit/Authorized Representative			Agency Head/Auth	norized Representative	
Date			Date			
. Receipt of	THE RESIDENCE OF THE PROPERTY				JEV No.	
Check/ ADA No. :		Date:	Bank Name & Account Number:			
signature :	VSU PAVILION	Date:	Printed Name:		Date	
fficial Receip	t No. & Date/Other Documents					