

VISAYAS STATE UNIVERSITY

Entity Name

Fund Cluster :

DISBURSEMENT VOUCHER #2021-100

Date: Dec. 06, 2021
DV No. :Mode of
Payment
☐ MDS Check ☐ Commercial Check ☐ ADA ☐ Others (Please specify)

Payee

JOSEFINA M. LARROSA

TIN/Employee No.:

ORS/BURS No.:

Address

VSU Visca Baybay City, Leyte

Particulars

Responsibility
Center

MFO/PAP

Amount

 Replenishment of expenses incurred of the
Pavilion per supporting papers attached
in the amount of - - - - -

VSU Pavilion

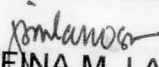
200010000

9,921.75

Amount Due

9,921.75

A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.


 JOSEFINA M. LARROSA
 GHP Manager

B. Accounting Entry:

Account Title

UACS Code

Debit

Credit

C. Certified:

- ☐ Cash available
- ☐ Subject to Authority to Debit Account (when applicable)
- ☐ Supporting documents complete and amount claimed proper

D. Approved for Payment

Signature

Signature

Printed
Name

NICK FREDDY R. BELLO

Printed Name

EDGARDO E. TULIN

Position

OIC HEAD ACCOUNTING

Position

VSU PRESIDENT

Date

Head, Accounting Unit/Authorized Representative

Agency Head/Authorized Representative

E. Receipt of Payment

Check/
ADA No. :

Date :

Bank Name & Account Number:

JEV No.

Signature :

Date :

Printed Name:

Date

Official Receipt No. & Date/Other Documents

JOSEFINA M. LARROSA