	VISAYAS STATE UNIVERS Entity Name	ITY		Fund Cluster :
	DISBURSEMENT VOUC	CHER		DV No. :
Mode of Payment	MDS Check Commercial Check	ADA	Others (Ple	ase specify)
Payee	MOISES NEIL V. SERIÑO	TIN/Employee 1	No.:	ORS/BURS No.
ddress	VSU, Visca, Baybay City, Leyte		valin 1	- Deliver
	Particulars	Responsibility Center	MFO/PAP	Amount
ommunication	ment of the amount used for n for research purposes. 3,390.00 3,390.00	Socio-Economic Research and Data Analytics Center 20201050- 1.97	1	3,390.00
1 Dec	TOTAL Expenses/Cash Advance necessary, lawful and incurred			3,3
Accountin		or		
Accounting	Supervise		Debit	Credit
Certified:	Supervise ag Entry: Account Title	or		Credit
Certified: Cash Subjection Supp	Supervise Account Title Account Title a available ect to Authority to Debit Account (when applicable) corting documents complete and amount claimed	UACS Code		Credit
Certified: Cash Subje	Supervise Account Title Account Title a available ect to Authority to Debit Account (when applicable) corting documents complete and amount claimed	UACS Code D. Approved fo		
Certified: Cash Subje Supp prop	Supervise ag Entry: Account Title a available ect to Authority to Debit Account (when applicable) corting documents complete and amount claimed per	UACS Code D. Approved for	r Payment	
Certified: Cash Subje	Supervise and Entry: Account Title Account Title a available ect to Authority to Debit Account (when applicable) corting documents complete and amount claimed per	UACS Code D. Approved for Signature	r Payment EDGAF	Sub-Jura
Certified: Cash Subjet Supp prop Signature Printed Name	Supervise Account Title Account Title available eet to Authority to Debit Account (when applicable) corting documents complete and amount claimed per NICK FREDDY R. BELLO	UACS Code D. Approved for Signature Printed Name	r Payment EDGAF	RDO E. TULIN
Certified: Cash Subjection Signature Printed Name Position Date Receipt of F	Supervise Account Title Account Title a available eet to Authority to Debit Account (when applicable) corting documents complete and amount claimed per NICK FREDDY R. BELLO Head, Accounting Unit/Authorized Representative	D. Approved fo Signature Printed Name Position	r Payment EDGAF	RDO E. TULIN
Certified: Cash Subjet Supp prop Signature Printed Name Position Date	Supervise Account Title Account Title a available eet to Authority to Debit Account (when applicable) corting documents complete and amount claimed per NICK FREDDY R. BELLO Head, Accounting Unit/Authorized Representative	D. Approved fo Signature Printed Name Position	EDGAF Univer	RDO E. TULIN