					Fund Cluster .
	Ent	Entity Name			
	DISBURSEMENT	ENT VOUCHER	CHER		Date :a DV No. :
Mode of Payment	MDS Check Cor	Commercial Check	ADA	Others (Please specify)	specify)
Payee	DIONESIO M. BAÑOC		TIN/Employee No.:	No.:	ORS/BURS No.:
Address	VSU, Visca, Baybay City Leyte				
	Particulars		Responsibility Center	MFO/PAP	Amount
To Liquidat allowance wt 01, 2023 as	To Liquidate the cash advanced for travel expenses and daily allowance while on travel to Manila for the period June 26-July 01, 2023 as per supporting papers hereto attached in the total amout of	ses and daily I June 26-July d in the total	GF-MOOE		27, 850
	Amount Due				27, 850
A. Certified:	A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.	lawful and incu	rred under my dire	et supervision.	
	Printed Nam	VICTOR B. ASIO	VICTOR B. ASIO  Printed Name, Designation and Signature of Supervisor	ervisor	
B. Accounting Entry:			IIVOS Code	$\ $	O-odit
	Account Title		UACS Code	Debit	Credit
C. Certified:		0	D. Approved	Approved for Payment	
Casi Subj	Cash available Subject to Authority to Debit Account (when applicable) Supporting documents complete and amount claimed proper	vhen applicable) ount claimed			
Signature			Signature		
Printed Name	NICK FREDDY R. BELLO	ELLO	Printed Name	EDGAR	EDGARDO E. TULIN
Position	Head, Accounting Office	ffice	Position	A concy Head/All	President  Arenov Head/Authorized Penracentative
Date	Trans, transming our transcrive rediscionary	o reducation	Date	. Borrell and a second and a second a s	
E. Receipt of Payment	f Payment				JEV No.
Check/ ADA No.:		Date:	Bank Name &	Bank Name & Account Number:	
Signature :		Date:	Printed Name:		Date
Official Recei	Official Receipt No. & Date/Other Documents				