

REQUISITION AND ISSUE SLIP

VISAYAS STATE UNIVERSITY

AGENCY

DIVISION :

RESPONSIBILITY CENTER

RIS NO.

DATE 11/9/2023

OFFICE **Eco-FARMI**

CODE


SAI NO.

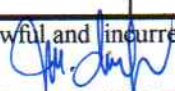
DATE

REQUISITION			ISSUANCE			
Stock Number	UNIT	DESCRIPTION	QTY.	UNIT PRICE	TOTAL VALUE	BALANCE
1	liters	Gasoline Charged to: Seedbank C CERTIFIED as to the availability of of appropriation in the amount of P _____ within 45 days period. ALICIA M. FLORES Head, Budget Office	20	74.00	1,480.00	
		TOTAL			1,480.00	

PURPOSE:

Grasscutter use in the demo farm

	REQUESTED BY	APPROVED BY	ISSUED BY	RECEIVED BY
SIGNATURE				
NAME	JEROME O. ARRIBADO	DANIEL LESLIE S. TAN		
DESIGNATION	Project In-Charge	OIC President		
DATE	11/9/2023			

VISAYAS STATE UNIVERSITY Entity Name				Fund Cluster :	
DISBURSEMENT VOUCHER				Date : 11/9/2023 DV No. :	
Made of Payment		<input type="checkbox"/> MDS Check <input type="checkbox"/> Commercial Check <input type="checkbox"/> ADA <input type="checkbox"/> Others (Please specify)			
Payee		VSU FUEL STATION		TIN/Employee No.:	
Address		VSU, Visca, Baybay City, Leyte			
Particulars		Responsibility		MFO/PAP	
Amount		Amount Due		1,480.00	
For the payment of 20 liters of Gasoline as per papers attached in the amount of....		Seedbank C Project		1,480.00	
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision.					
 JEROME O. ARRIBADO Director, Eco-FARMI					
B. Accounting Entry:					
Account Title		UACS Code		Debit	
Credit		C. Certified:		D. Approved for Payment	
<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	
Signature		Signature		Printed Name	
Printed Name		Printed Name		DANIEL LESLIE S. TAN	
Position		Position		OIC President	
Date		Date		Agency Head/Authorized Representative	
Signature		Signature		Date	
Printed Name		Printed Name		Date	
Position		Position		Date	
Date		Date		Date	
E. Receipt of Payment					
Check/ADA No. :		Date :		Bank Name & Account Number:	
Signature :		Date :		Printed Name:	
VSU FUEL STATION		VSU FUEL STATION		VSU FUEL STATION	
Official Receipt No. & Date/Other Documents					