(5)	ASS	
II.	O	
	ER	

VISAYAS STATE UNIVERSITY

Entity Name

Fund Cluster	:
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VERS	DV No. :							
Mode of Payment	MDS Check Commerci	ial Check		ADA	Others (Please	specify)		
Payee			TIN/I	TIN/Employee No.:		ORS/BURS No.:		
Address	SERVICE			916-962-12	MOOE 02-101101- 2021-05-02219			
Particulars				Responsibility	MFO/PAP	Amount		
FULL payment for the purchase of supplies/materials per Invoice # 29089-29094 dated 12/2/2021 with all the required supporting paper hereto attached in the total amount of				VARIOUS	VARIOUS	1,067,358.90 <u>57,179.94</u>		
Net Sales 952,999.02 Add: 12% VAT 114,359.88						1,010,178.96		
	_	1,067,358.	.90		Warranty Security	10,101.79		
	DDS-21-07R-047 (GF) ORTED PR's UPPLIES				LD	31,689.86		
	o <u>Lieo</u>	Amount	Due			968,387.31		
A. Certified: Expenses/Cash Advance necessary, lawful and incurred under my direct supervision. JESSAMINE C. ECLEO Head, Office of the Head for Procurement B. Accounting Entry:								
7 CCOuntil	Account Title		U	ACS Code	Debit			
_								
C. Certified: D. Cash available			D.	Approved for Payment				
Subj	ject to Authority to Debit Account (when a porting documents complete and amount coper	**						
Name NICK PREDDT R. BELLO Position OIC Head, Accounting Unit			ignature nted Name EDGARDO E. TULIN President					
Date Date	E Dovemont			Date		HEX. N.		
Check/ ADA No. :	rayment	Date :	Bank	Name & Accor	unt Number:	JEV No.		
Signature :	JOEBZ COMPUTER SALES AND SERVICE	Date :	Printed Name:		Date			
Official Receipt N	To. & Date/Other Documents							