VICTORIAS CITY WATER DISTRICT

Victorias City, Negros Occidental

BUDGET APPROPRIATION REQUEST FOR BUDGET YEAR Account No.: Account Name:						
Appropriated Last Year	Expended Last Year	Appropriated Current Y e a r	Expended First Nine Months	Anticipated Current		
JUSTIFICATION:						
Division Requesting:	Prepared by:		Total Amount of Reques	st:		
Trending up or down at rate:	Recommended by:		Recommended Appropriat	cion:		
By Board Action:	Chairman:		Approved Appropriation	n:		

Form BU - I

DISBURSE	No.:							
VICTORIAS C	Date:							
MODE OF PAYMENT								
Commercial Check Others								
Name of Claimant:		Employee No.:		TIN:				
Address:				Responsibility Center Code:				
	Amount							
		A						
A Certified: Expenses/Advances necessary, lawful and incurred under my direct supervision	B Certified: Supporting docu and proper, and	uments complete	nt Due C Approved For Payment Amount					
Signature: Printed Name: Position: Date:	Signature: Printed Name: Position: Date:							
D Received Payment: P	Check No. :	Date:	Head of Agency/Authorized Representative JEV No.:					
Signature Over Printed Name/Date	OR No. :	_ Date:	Date:					