

ITINERARY OF TRAVEL

Department of Environment and Natural Resources Office-Provincial Office
Agency

No. _____

Name : **ALAN L. VALLE**Purpose of Travel : Please see attached travel order

Date	Places to be visited	TIME		EXPENSES			
		Departure	Arrival	Means of Transpo.	Expenses	Per Diem	Total Amount
April 15	OS to Pola To OS	5:00 am	3:00 pm	RP Vehicle		1,100.00	1,100.00
					-	1,100.00	1,100.00

I certify that: (1) I have reviewed the foregoing itinerary, (2) the travel is necessary to the service, (3) the period covered is reasonable and (4) the expenses claimed are proper.

Prepared by:

ALAN L. VALLE
OIC-PENRO

LORMELYN E. CLAUDIO, CESO IV
Regional Executive Director

CERTIFICATE OF TRAVEL COMPLETED

(Agency Head) _____

PENRO
(Designation)

PENRO OR MDO
(Station)

I CERTIFY THAT I have completed as travel authorized in Itinerary Travel No. _____ dated _____
under conditions indicated below:

☐

Strictly in accordance with approved itinerary

☐

Cut short as explained below. Excess payment in the amount of P _____
was refunded under O.R. No. _____ dated _____.

☐

Extended as explained below. Additional itinerary was submitted.

☐

Other deviations as explained below

Explanation of Justification:

Evidence of Travel:

☐

Used tickets

☐

Certificate of Appearance

☐

Others
Travel Order

Respectfully submitted:


ALAN VALLE

Officer or Employee

On evidence and information of which I have acknowledged, the travel was normally undertaken.

LORMELYN E. CLAUDIO, CESO IV

Regional Executive Director



Republic of the Philippines
Department of Environment and Natural Resources
MIMAROPA Region
Provincial Environment and Natural Resources Office
Calapan City, Oriental Mindoro

TRAVEL ORDER

No. _____

NAME: ALAN L. VALLE
POSITION: OIC-PENR Officer
DEPARTURE DATE: April 15, 2023
DESTINATION: Pola, Oriental Mindoro

Salary: _____
Div./Sec./Unit: Office of the PENRO
Official Station: PENR Office
Arrival Date : April 15, 2023

PURPOSE OF TRAVEL: To attend/assist on the visit of President Marcos on the Oilspill affected municipality

Per Diems/Expenses Allowed : _____
Assistants or Laborers Allowed : _____
Appropriations to which travel should be charged : _____
Remarks or special instructions : _____

Certifications :

This is to certify that the travel is necessary and is connected with the functions of the official/ employees of this Div./Sec./Unit

Recommending Approval:


Approved by:

DONNA MAYOR- GORDOVE, CESO IV
Assistant Regional Director
for Management Services

LORMELYN E. CLAUDIO, CESO IV
Regional Executive Director

AUTHORIZATION

I hereby authorize the Accountant to deduct the corresponding amount of the unliquidated cash advance from my succeeding salary for my failure to station pursuant to Commission on Audit (COA) Circular No. 2012-004 dated November 28, 2012. liquidate this travel within twenty (20) days upon return to my permanent official.


ALAN L. VALLE
Official Employee