Republic of the Philippines

City/Municipality of Aparri

Province of Cagayan

**BARANGAY AGUSI**

**OFFICE OF THE PUNONG BARANGAY**

**ITINERARY OF TRAVEL**

No. \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose of Travel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date 20\_\_\_\_ | Places to be Visited (Destination) | TIME | | EXPENSES | | | | |
| Depart | Arrival | Means of Transportation | | Transportation Expenses | Per Diem | Total Amount |
|  |  |  |  |  | |  |  |  |
| **TOTAL:** | | | | | | |  |  |
| I certify that: (1) I have received the foregoing itinerary, (2) the travel is necessary to the service, (3) the period covered is reasonable and (4) the expenses claimed are proper.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Immediate Supervisor | | | | | Prepared by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature over Printed Name  Position | | | |
| Approved by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature over Printed Name  Position | | | |