



Republic of the Philippines
SULTAN KUDARAT STATE UNIVERSITY
EJC Montilla, City of Tacurong, 9800
Province of Sultan Kudarat

<https://www.skdsu.edu.ph>

officetothepresident@skdsu.edu.ph

(SAR) 308-7336

CERTIFICATE OF TRAVEL COMPLETED

*I HEREBY CERTIFY that I have completed the approved Itinerary of
Travel under the conditions indicated below:*

☒
☐
☐

Strictly in accordance with the approved itinerary

Cut shortly as explained below, excess payment in the amount of _____

Other deviators as explained below.

Explanations/Justifications:

Deployment of BTVTED pre-service teachers 4th year students, last February 10-12, 2025

Evidence of travel attached hereto:

1. Invitation Letter
2. Certificate of Appearance
3. Travel Order
4. Receipt

Respectfully submitted:

JENA MAE F. VALERIO

Faculty

Approved:

ROMMEL M. LAGUMEN

Campus Director



Republic of the Philippines
SULTAN KUDARAT STATE UNIVERSITY
 EJC Montilla, City of Tacurong, 9800
 Province of Sultan Kudarat

Website: www.sksu.edu.ph Email: officeofthepresident@sksu.edu.ph (064) 216-7134

CERTIFICATION OF EXPENSES NOT REQUIRING RECEIPTS
 Pursuant to COA Circular No. 2017-001 dated June 19, 2017

Name of Employee	ABRAHAM S. ACCAD		Employee No.	
Office	SKSU - Isulan Campus			
Division	Particulars		Amount	
No.	Date			
	2/10/2025	Station-Isulan National High School		25.00
		Isulan National High School to Biwang Datu Matilondo Galmak NHS		80.00
		Datu Matilondo Galmak NHS TO Busok NHS		100.00
		Busok NHS To SNA, NHS		200.00
	2/11/2025	Isulan Campus to Bambad NHS		60.00
		Bambad NHS to Lapuz, NHS		60.00
		Lapuz, NHS to Norala, NHS		20.00
		Norala, NHS To Panay, NHS		100.00
		Panay, NHS To Libertad NHS		100.00
		Libertad NHS To Malaya Banga, NHS		100.00
		Malaya Banga, NHS To T'boli, NHS		150.00
	2/12/25	Station to Esperanza, NHS		100.00
		Esperanza, NHS To Tacurong NHS		150.00
		Tacurong NHS To Lambayong NHS		150.00
		Lambayong NHS To Kalanawe II, NHS		150.00
Total				1,545.00

Purpose:

Deployment of BTVTED pre-service teachers last February 10-12, 2025 .

I hereby certify that the above expenses are incurred as they are necessary for the above cited purpose that above cited purpose, that above good and services were acquired from parties not issuing receipts. And that I am fully aware that willful falsification of statements is punishable by law.

	Certified correct	Noted by:
Signature		
Printed Name	ABRAHAM S. ACCAD	ROMMEL M. LAGUMEN