



REQUISITION SLIP

I. TRAVELER INFORMATION

OFFICIAL NAME Aaron Christian Basa	EMPLOYEE ID 12345	BIRTHDAY Dec 20, 2025
UNIT OFFICE Office of the Vice President for Administration	MOTHER UNIT System Human Resource Development Office	
DESIGNATION test	EMAIL / UP MAIL ajbasa@up.edu.ph ajbasa@up.edu.ph	
CONTACT NUMBER 09918337116	ADMIN OFFICER test	

II. TRAVEL & FLIGHT DETAILS

PURPOSE OF TRAVEL test			
DESTINATION ROUTE MNL - BXU		TRIP TYPE Round-Trip	
DEPARTURE December 20, 2025 7:24 AM		RETURN December 20, 2025 6:26 PM	
AIRLINE Philippine Airlines	SEAT CLASS Business Class	BAGGAGE Hand-carry only	INSURANCE Requesting
SPECIAL REQUESTS test			

III. AUTHORIZATION

SUPERVISOR REMARKS / NOTES test

I hereby certify that the information provided is true and correct, and that this travel is in accordance with government policies and University procedures.

AARON CHRISTIAN BASA
TRAVELER'S SIGNATURE

TEST
IMMEDIATE SUPERVISOR
Email: ajbasa@up.edu.ph
Date: Dec 20, 2025

