ITINERARY OF TRAVEL

: VISAYAS STATE UNIVERSITY

cluster: STF-Extension

Name: SALOMA B. GISULGA Date of Travel: JULY 11-15, 2023 Purpose of Travel: To attend the BIDANI Network National

Position: Science Research Specialist

Official Station : ISRDS Convention at Umali Auditorium, SEARCA, UPLB, Laguna

Official Station: ISRUS				Convention at Umaii Auditorium, SEARCA, UPLB, Laguna					
Date	Places to be visited	TIME		Means of	Transpor-	Per	Others	Total	
	(Destination)	Departure	Arrival	Transportation	station	Diem	Others	Amount	
July 11, 2023	VSU to Tac. Airport Tac. Airport-Mla. Airport	8:00AM 12:30PM	10:00AM 1:30PM	CV Plane (Round Trip)	in .		e e	9,952.00	
	Mla. Airport-Bus Terminal Bus Terminal-UPLB	2:30PM 3:00PM	3:00PM 4:00PM	Taxi Bus	300 200	1,980.00		2,480.00	
July12, 2023	Convention (SEARCA)	8:00AM	5:00 PM			2,200.00		2,200.00	
July 13, 2023	Convention (SEARCA)	8:00AM	5:00PM			2,200.00		2,200.00	
July 14, 2023	UPLB-Bus Terminal,Mla MlaBus Terminal-Pasay at Visca Manila Office	2:00PM 4:00PM	4:00PM 5:00PM	Bus Taxi	300 200	2,200.00		2,700.00	
July 15, 2023	Mla. Airport-Tac. Airport Tac. Airport-VSU	9:00AM 11:00AM	10:00AM 12:00P.M	Taxi Plane	300	880.00		880.00	
2	X-X-X-X-							20,412.00	
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		I	TOTAL					20,412.00	
Drangrad by .									

Prepared by:

SALOMA B. GISULGA Signature over Printed Name

No.: ____

Approved by:

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.

> LILIAN B. NUÑEZ Signature over Printed Name Immediate Supervisor

EDGARDO E. TULIN

Signature over Printed Name Agency Head/Authorized Representative

3	Fund Cluster : STF Date : June 9, 2023 DV No. :								
Mode of Payment	MDS Check Con	nmercial Check	ADA	Others (Please	specify)				
Payee	Saloma B. Gisulga	TIN/Employee	No.:	ORS/BURS No.:					
Address	Visayas State University, Visca,	Baybay City, Leyt	e						
	Particulars		Responsibility Center	MFO/PAP	Amount				
in attending at Umali Aud 11-15, 2023	ADVANCE for travel expenses in the BIDANI Network National Co ditorium, SEARCA, UPLB, Lagur as per supporting papers hereto nt of	nvention na on July attached	ISRDS	STF-Extension	20412.00				
A. Certified:	Amount Due Expenses/Cash Advance necessary	y, lawful and incu	rred under my dir	ect supervision.	20,412.00				
MOISES NEIL V. SERIÑO Dean, CME Printed Name, Designation and Signature of Supervisor									
B. Accounti									
	Account Title		UACS Code	Debit	Credit				
C. Certified:			D. Approved	D. Approved for Payment					
Sub	h available ject to Authority to Debit Account (porting documents complete and ar oper								
Signature	-		Signature						
Printed Name	NICK FREDDY R. BELLO		Printed Name	EDGARDO E. TULIN					
Position	Accountant II	Position	President						
	Head, Accounting Unit/Authorized Representative		Tosidon	Agency Head/Authorized Representative					
Date			Date						
E. Receipt o	f Payment	D 111		JEV No.					
Check/ ADA No. :		Date :	Bank Name &	Account Number:					
Signature :	SBGisulga	Date :	Printed Name:		Date				
Official Recei	ipt No. & Date/Other Documents								