



CERTIFICATION

Date: June 16, 2022

This is to **CERTIFY** that I, Chinelo M. Cardaño of the
(Name of Employee/Accountable Officer)


Department/Office of Advanced Research and Innovation Center. I am transferring my


property accountabilities to Sarah Jean C. Sugano during
(Name of Employee/Receiving Accountable Officer)

my Study Leave period from September 2022- September 2023.
(Purpose of Leave) (Inclusive Dates of Leave)


This is to **CERTIFY** further that I will automatically assume my property accountabilities upon my reinstatement to work.

Conforme:


CHINELO M. CARDANO
Signature of Employee
(Accountable Officer)


SARAH JEAN C. SUGANO
Signature of Employee
(Accepting Property Accountabilities)

Noted:


MA. THERESA P. LORETO
Department/Office Head

Approved:

ALICIA M. FLORES
Head, SPMO