



ISO 9001 : 2015

AUTHORITY TO TRAVEL
Division of Quezon

DEPED-4A-GF082002-17

DOCUMENT NO.	VERSION NO. 1.1	REVISION NO. 0.1	DATE: 19 Sep 2017	Page 1 of 1
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Division Reference Number	Click or tap here to enter text.			
NAME OF OFFICIAL/EMPLOYEE	DESIGNATION & STATION			
PIONILLA, MARITA A. ILAO, ASUNCION C. MAUHAY, JOAN ALEJANDA R. DE VILLA, LUIS LACERNA, NEMECIO PERMEJO, RAUL CUENTO, ROMMEL MENDOZA, DARWIN BERNARDO, DANTE AYAG, RUSHEL FRANCISCO, MARINCO REVILLAME, GRACE EVANGELISTA, SHIRLY VILLEGAS, CARLOS ALVAREZ, ANTONIO MERJUDIO, MERIEL RODA, SHERNAN SANTIAGO, EMMANUEL COSEJO, MA. DONNA	EDUCATION PROGRAM SUPERVISOR EDUCATION PROGRAM SUPERVISOR EDUCATION PROGRAM SUPERVISOR CHIEF ELEM / TIAONG ATHLETICS / SAN NARCISO BILLIARD / CANDELARIA BADMINTON / MAUBAN QUEZON / FOOTBALL FUTSAL / MAUBAN GYMNASTIC / PAGBILAO SOFTBALL / TIAONG SWIMMING / QUEZON NHS TAEKWANDO / CANDELARIA TENNIS / TIAONG VOLLEYBALL / MAUBAN WUSHU / PAGBILAO SPED / SAN ANTONIO ALS / PITOGO DANCE SPORT / QUEZON NHS			
<small>LAST NAME, FIRST NAME MI</small>				


PURPOSE: Management of fourth Congressional Athletic Meet

DESTINATION: Tagkawayan, Quezon

PERIOD OF TRAVEL	FROM	26 Sep 2017	TO	29 Sep 2017
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Please Check: 1. <input checked="" type="checkbox"/> Official Business <input type="checkbox"/> Cash Advance <input type="checkbox"/> Reimbursement 2. <input type="checkbox"/> Official Time (NO EXPENSE to be incurred by the Division Office/School)	Estimated Expense Registration Fee Php _____ Transportation _____ Travel Allowance _____ On Travel Time only _____ Full Allowance _____ TOTAL ESTIMATED EXPENSES Php _____
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Requested by: MARITA A. PIONILLA, Ed. D <i>Education Program Supervisor</i>	Funds Available- for Official Business (specify the source of funds) <input type="checkbox"/> Division Fund <input type="checkbox"/> LSB Fund <input checked="" type="checkbox"/> Others: _____	Approved:  MERTHEL M. EVARDO, CESO VI <i>Schools Division Superintendent</i>
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Recommending Approval:  GERLIE M. ILAGAN <i>Assistant Schools Division Superintendent</i>	Noted <input type="checkbox"/> On Official Time Only <input type="checkbox"/> Other Funds: _____ SUSAN P. FONTARUM <i>Division Accountant</i>
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REMARKS:	<p>DEPED QUEZON ICT UPLOADED BY: <i>Gian</i> DATE: <i>9-25-17</i> TIME: <i>11:21</i> REFERENCE NO.: <i>100947</i></p>
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