



## CERTIFICATION OF TRAVEL COMPLETED

Entity Name : Far North Luzon General Hospital & Training Center

Fund Cluster : \_\_\_\_\_

\_\_\_\_\_  
Station

I HEREBY CERTIFY THAT I have completed the travel as authorized in the Travel Order/Itinerary of Travel No. \_\_\_\_\_ dated \_\_\_\_\_ under conditions indicated below:

- Strictly in accordance with the approved itinerary.
- Cut short as explained below. Excess payment in the amount of ₱ \_\_\_\_\_ was refunded under O.R. No. \_\_\_\_\_ dated \_\_\_\_\_.
- Extended as explained below, additional itinerary was submitted.
- Other deviations as explained below.

Explanations or justifications:

\_\_\_\_\_

Evidence of travel:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Respectfully Submitted:

\_\_\_\_\_  
Name/ Signature of Employee

On evidence and information of which I have the knowledge, the travel was actually undertaken.

Approved:

\_\_\_\_\_  
Division Head