



Bureau of Corrections

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OFFICIAL BUSINESS SLIP

Page 1 of 1



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF JUSTICE
BUREAU OF CORRECTIONS
MEDICAL & DENTAL DIVISION

Muntinlupa City

Tel No. 850-01-43 email: hospitalnbp@yahoo.com.ph

OFFICIAL BUSINESS SLIP AUTHORIZATION

To Whom It May Concern:

This is to authorize _____ to travel on official business trip to go to the following office(s) on _____.

OFFICE (Destination)

Telephone Number

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Nature of Business:

Signature over printed name

Approved by:

MA. LOURDES M. RAZON, M.D.
OIC, Medical and Dental Division

*Attached Related Documents

TO BE FILLED BY OFFICE DESTINATION

CERTIFICATE OF APPEARANCE

This is to certify that _____ had appeared in this office on

Time of Arrival (Destination)

--

Time of Departure from Destination

--

Signature over printed name

*Attached Related Documents