

Unit 1407 Meridian Bldg. Golam drive, Kasambagan Cebu City, 6000 Cel. No. (+63) 9998819731

|   | E)                               | KIT CLEARANCE FORM            |                                   |                    |          |  |
|---|----------------------------------|-------------------------------|-----------------------------------|--------------------|----------|--|
| Last Name: First Name: Middle Name:                                   |                                  |                               |                                   |                    |          |  |
| Designation:  | Emp. No.:                        |                               | Department / Section              | Office / Branch    | n / Site |  |
| Email Address:  | Contact No.:                     |                               | Date Hired: Date Separated:       |                    |          |  |
| Reason for Separation:  |                                  |                               | Employment Status:                | -                  |          |  |
| ☐ Voluntary Resignation ☐ Transfer of Branch (lateral)                |                                  |                               |                                   |                    |          |  |
| ☐ End of Probationary Employment ☐ Work Abandonment                   |                                  |                               | ☐ Consultancy                     | Regular            |          |  |
| ☐ Redundancy ☐ Discontinuance   |                                  | ontinuance                    | ☐ Contractual                     | Probationary       |          |  |
| ☐ Promotion ☐ Termination For Cause                                   |                                  | Fixed-Term                    | Project Employee                  |                    |          |  |
| Others:   |                                  |                               |                                   |                    |          |  |
| Items For Endorsement   |                                  |                               | CLEARED BY                        |                    |          |  |
|   | Status                           | Amount                        | Manager / In-Charge               | Signature          | Date     |  |
| Company Lanyard   |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Company ID  |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Company Access Cards  |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Client Specifics:   |                                  |                               |                                   |                    |          |  |
| Slack   |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Distribution List   |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Devices (Headsets/Laptops/Mobile Phones etc.)                         |                                  |                               | JOHN KARL ATAMOSA                 |                    |          |  |
| Salary Advancement/Loans  |                                  |                               | STEPHANIE YBAÑEZ                  |                    |          |  |
| Note: *Indicate Not Applicable "N/A", as appropriate.                 |                                  |                               | Noted by:                         |                    |          |  |
| *Synopsis attached, for computation details of gross final pay, total |                                  |                               | CLADITH MALAZARTE<br>HR Manager   |                    |          |  |
| accountabilities and net fir  | •                                | · ·                           | Approved by:                      |                    |          |  |
| submit an affidavit of loss.  |                                  |                               | MICHELLE ANN OSORIO               |                    |          |  |
|   |                                  |                               | Chief Executive Officer           |                    |          |  |
| Additional Notes:   |                                  |                               |                                   |                    |          |  |
|   |                                  |                               |                                   |                    |          |  |
|   |                                  |                               | uture, after verification of cust | omer records, etc. |          |  |
| l will settle accountabiliti  | es with the company withi        | in 30 days or as the day of 1 | my last employment.               |                    |          |  |
| En  | nployee's Signature Over<br>Name | Printed                       | Date                              |                    |          |  |