

	Subsidiaries and Affiliates		
	WGI	WHI Carmona	FMPI/FMTCC
	WHI - HO	CCC	PBI
	WLI	MRDC	Others:
	PRI	SPAI	
Form Title: OFFICIAL BUSINESS FORM			

***** TO BE SUBMITTED 1 DAY BEFORE THE SCHEDULED OB *****

Name: Boado, Schultz Henry	Department: IT Department	Date Filed: May 7, 2024	Date of OB: May 7, 2024
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1. Purpose: SAP Training			
Contact Person / Contact No. XCELER8 Technologies Inc.	Destination: Romulo Cafe, Jupiter Makati	Time In: 10:00 AM	Time Out:
2. Purpose:			
Contact Person / Contact No.	Destination:	Time In:	Time Out:
3. Purpose:			
Contact Person / Contact No.	Destination:	Time In:	Time Out:
4. Purpose:			
Contact Person / Contact No.	Destination:	Time In:	Time Out:

Prepared by:

Employee's Signature
Signature over Printed Name/Date

Approved by:

Renz Cabato /

Immediate Head / Head of Business Unit
Signature over Printed Name/Date

Noted by:

HR Analyst - Timekeeping
Signature over Printed Name/Date

OFFICIAL BUSINESS REPORT (Itemized Activities to be filled out before submitting OB Form)		
ITEMIZED ACTIVITIES	RESULTS (DONE OR PENDING)	SIGNED BY CONTACT PERSON

Note: OB Form must be submitted 2 days after with attached report/minutes. Failure to accomplish this form completely shall mean non-payment of any expenses incurred by the employee and shall not be honored as official.

Approved by: _____ Immediate Head / Head of Business Unit
