
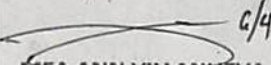
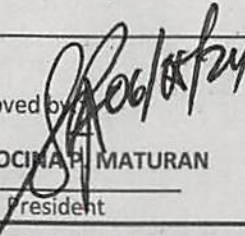
	<b>STAFFERS PROVIDER OF ASIA INC.</b>	<b>OFFICIAL BUSINESS FORM</b> <small>FR-HRD-22rev08</small>	<input type="checkbox"/> WGI <input type="checkbox"/> WHI <input type="checkbox"/> MRDC <input type="checkbox"/> Others:	
(To be submitted 3 days before the scheduled OB)				
<input type="checkbox"/> Training <input type="checkbox"/> Plant Visit <input checked="" type="checkbox"/> XXXX    Others				
<b>Name</b> MEA ANN VILLANUEVA		<b>Department</b> ADMIN		<b>Date Filed</b> 04-Jun-24
				<b>Date of OB</b> 04-Jun-24
<b>1. PURPOSE</b> ASSIST PYRGARD PERSONNEL FOR SMOKE DETECTOR				
<b>Contact Person /</b> RESTY		<b>Destination :</b> MANDALUYONG		<b>9:00AM</b> <b>12:00NN</b>
<b>2. PURPOSE</b>				
<b>Contact Person /</b> Contact No:		<b>Destination :</b>		<b>IN</b> <b>OUT</b>
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">   <b>MEA ANN VILLANUEVA</b>  <small>Employee's Signature</small> </div> <div style="width: 20%;">           Authorized by:  <b>MARWIN DEVALID</b>  <small>Admin/Marketing Head</small> </div> <div style="width: 20%;">           Approved by:   <b>EUFROCINA P. MATURAN</b>  <small>President</small> </div> <div style="width: 20%;">           Noted by:            _____  <small>MR/Admin</small> </div> </div>				
<b>OFFICIAL BUSINESS REPORT</b> (To be filled out before submitting OB Form)				
<b>ITEMIZED ACTIVITIES</b>		<b>RESULTS</b> (Done or Pending)	<b>SIGNED BY CONTACT PERSON</b>	
ASSIST PYRGARD PERSONNEL FOR SMOKE DETECTOR		DONE		
<small>Note: Failure to accomplish this form completely and correctly shall mean non-payment of any expenses incurred by the employee and will not be honored as official.</small>				
Immediate Supervisor: <u>Marwin Devalid</u>			Noted by: 