
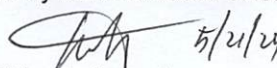
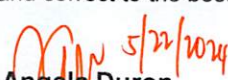
	Subsidiaries and Affiliates		
	<input type="checkbox"/> WGI <input type="checkbox"/> WHI - HO <input type="checkbox"/> WLI <input type="checkbox"/> PRI	<input type="checkbox"/> WHI Carmona <input type="checkbox"/> CCC <input type="checkbox"/> MRDC <input type="checkbox"/> SPAI	<input type="checkbox"/> FMPI/FMTCC <input type="checkbox"/> PBI <input type="checkbox"/> Others: _____
Form Title: HANDOVER REPORT			

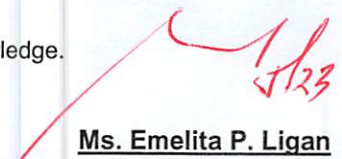
Employee Name: Niño A. Faundo		Date Hired: January 10, 2022	
Department: Billing and Collection		Leave Date/s: May 28-30, 2024	
Position: Billing and Collection Officer		Leave Return: May 31, 2024	
Assignment	Classification P – Pending, may wait until I return U – Urgent, need attention while I'm away	Temporary Stand – in (Full Name)	Acknowledge by: (Signature with date)
1. Interest and Penalties - Ongoing 2. Closing Entries	Pending Pending	Amery Galang	 5/21/2024

I fully understand that I am expected to report for work after the end of date/time I indicated herein. In the event that I am unable to return to W Group or any of its affiliate and be unavailable for work on the indicated date, for reason beyond my control, I will notify my Department Head / Immediate Supervisor by telephone, cellular phone or email. My contact address and contact number while on leave is;
085 Sto. Nino Hagonoy Bulacan 09217295021.

Further, I certify that the reason of leave indicated herein is true and correct to the best of my knowledge.


Niño A. Faundo
 Employee
 (Signature over Printed Name / Date)


Ms. Angela Duron
 Immediate Head
 (Signature over Printed Name / Date)


Ms. Emelita P. Ligan
 Department Head
 (Signature over Printed Name / Date)