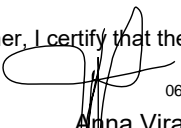
	<b>Subsidiaries and Affiliates</b>		
	<input type="checkbox"/> WGI <input type="checkbox"/> WHI - HO <input type="checkbox"/> WLI <input type="checkbox"/> PRI	<input type="checkbox"/> WHI Carmona <input type="checkbox"/> CCC <input type="checkbox"/> MRDC <input type="checkbox"/> SPAI	<input type="checkbox"/>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

Employee Name: Anna Liza L. Viray		Date Hired: November 18, 2009	
Department: Accounting		Leave Date/s: JUN 17, 2024	
Position: Asst. Manager Statutory Reporting		Leave Return: JUN 18, 2024	
Assignment	<b>Classification</b>  <b>P – Pending</b> , may wait until I return <b>U – Urgent</b> , need attention while I'm away	<b>Temporary Stand – in</b>  <i>(Full Name)</i>	<b>Acknowledge by:</b>  <i>(Signature with date)</i>
Compliance Related:  1. Attends Urgent request /concerns  2. Completion of receipts for 2550Q (Q2_2024)	U  P	Alexander Meterio	

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;

\_\_\_\_\_.

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

 06.4.2024 Anna Viray <b>Employee</b> (Signature over Printed Name / Date)	_____ Josephine Galera <b>Immediate Head</b> (Signature over Printed Name / Date)	_____ Gilbert Chua <b>Department Head</b> (Signature over Printed Name / Date)
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