

	Subsidiaries and Affiliates		
	<input type="checkbox"/> WGI <input checked="" 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: Florence Jacuiza		Date Hired: April 16, 2018	
Department: Logistics		Leave Date/s: May 13, 2024 ✓	
Position: Export Staff		Leave Return: May 14, 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)
-SAP & Ticket RFP (if any)	U	-Ate Eloisa	<i>[Signature]</i> 5/10
Attend other concerns -Email -Skype	U	-Sir Dennis -Ma'am Van -Diane	<i>[Signature]</i> 5/10 - June 9/10
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: 09281992146/09760494642. ✓			
Further, I certify that the reason of leave indicated herein is true and correct to the best of my knowledge.			
<i>[Signature]</i> 5/10/24 Florence Jacuiza Employee (Signature over Printed Name / Date) Date)	<i>[Signature]</i> 5/10/24 Immediate Head (Signature over Printed Name / Date)	<i>[Signature]</i> 5/10/24 Department Head (Signature over Printed Name / Date)	