

(FORM D)

TRANSMITTAL FORM

Name of HK Agency: JOJO GOOD WELL EMPLOYMENT AGENCY LIMITED Agency Code: MWOHK-2023-170

Name of Phil. Agency: PLACEWELL INTERNATIONAL SERVICES CORPORATION

Date Filed: _____

To: PHILIPPINE CONSULATE GENERAL

Submitted here for authentication are _____ sets of Employment Contracts.

EMPLOYER NAME	EMPLOYEE NAME	N/R/T	CONTRACT NO.	FOR CONSULATE USE
				Date Submitted: _____
				Date Released: _____
				Date Received: _____
				No. of Sets: _____

CHOW SUK FAN JO JO

NAME OF OWNER/MANAGER & COMPANY CHOP

(Signature over printed name)