

DEACON FOR TRAVEL.

## FLIGHT BOOKING REQUEST FORM

REASON FOR TRAVEL:												
BMI EVENT	TRAINING	VISIT	SPONSORSHIP						ADMIN	ISTRATIVE I	DEPARTMENT	
EXTERNAL EVENT	DEMO	TRO	UBLESHOOTING	OTHERS _								
TYPE OF BOOKING:	NEW BOOKING	REBO	OOKING C	ANCELLATION	REASON	FOR REBOOK	CING OR CAN	CELLA	TION:			
NAME OF TRAVELER			BIRTHDATE	DEPARTURE DATE & TIME	DESTINATION (FROM-TO)	AMOUNT	RETURN DATE & TIME	DES (F	TINATION ROM-TO)	AMOUNT	TOTAL AMOUNT	
		WITH	LUGGAGE:	N Y N	Kg AMOUN	т	Y N	Kg No.	AMOUNT			
		*****	TEOGOAGE.		No.	•		No.		ND TOTAL		
REMARKS:										-		
PREPARED BY						APPROVED BY				BOOKED BY		
			-									
Employee's Signature Imp			Immedia	madiata Superior		KATHLEEN REYES, MHM, DBA						
Employee's Signature (Signature over Printed Name)			Immediate Superior (Signature over Printed Name)			Chief Operating Officer				Executive Assistant		
DATE SIGNED: DATE SIGNED:					DATE SIG	DATE SIGNED:			DATE OF BOOKING:			