



## Work Order Completion Form

**Name:** LOIDA ARELLANO

**Address:** 7 HOGAN ST PENTAGON HOMES BALARA QUEZON CITY METRO MANILA PHILIPPINES 1119

**Mobile No.:** 639175190099

**Email:**

**Work Order No.:** F5823677

**Work Order Description:** Fault Service Cable

**Completion Date:** 12/19/2019 2:37:03 PM

**Time Start:** 12/18/2019 5:27:00 PM

**Time End:** 12/19/2019 2:36:00 PM

**Technician Name/s:** EUBERTO NIODA - SKY200328

I hereby acknowledge receipt of the item/s in good working order and condition. I have also reviewed this form and concur with service team on the actual work rendered. I understand pertinent charges will be collected and/or will appear on my next billing as stated. I hereby authorize the Company Engineers to conduct a Quality Assurance/Audit Inspection to be scheduled any day after the service is rendered. I also acknowledge that my service provider may disclose all information that I have shared to its affiliate companies, authorized agents or representatives, employees, consultants and personnel on a need to know basis, subject to utmost confidentiality.

**Subscriber / Authorized Representative:** hj

**Signature:**