

## NEOM Hospital Scan Accommodation Check-Out Form

Section 1. Guest Details			
Guest Name  Medianul Mubaut  Company ID/Passport No. 10129 152722455 Company Name  Falsula			
Company ID/Passport No.	10629 152722455	Company Name	Fakuh
Department	Cu	Position	Fakuh Consultant
Building Number	- B2	Room Number	- 5
Status/Rationale of Leave: Annual Leave Emergency Leave Medical Leave Others  Section 2. Furniture, Electrical, Appliances & 10627.			
Personal Items	Issued No	Common Ite	
Bed with mattress	1	Fridge	1
Bedside Table	1	TV	1
Bed Sheet, Pillow & Pillowcase	2	Telephone	1
Duvet, Bath Towel, Hand Towel& Face Towel	1	Chairs	2
Room Door Key	1	Coffee Table	1
Snack Plate, Coffee Mug, WaterGlass & Spoon	1	TV Remote	1
Room Slippers	1	A/C Remote	1
Welcome Pack Set	1	Laundry Bag	1
Bed Lamp	1		
Section 3. Guest Remark			
Guest Signature: Check-Out Date 17/08/14			
Section 4. Accommodation In-charge Remarks			
Rooms are in good condition Yes No			
Keys returned Yes No			
Accommodation In-charge Name Rug			
Accommodation In-charge Signature	amiu	Date	17/8/24
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NHOS-O-FO- Accommodation Check-Out Form

formed from the group

