

ITINERARY RECEIPT

Booking Details

Status: CONFIRMED

Booking Date: Sat. 06 Oct. 2018 Booking Reference: **UGQJHD**



Flight Details

Flight No./ Airline

Departure

Arrival

Cebu Pacific Air 353806

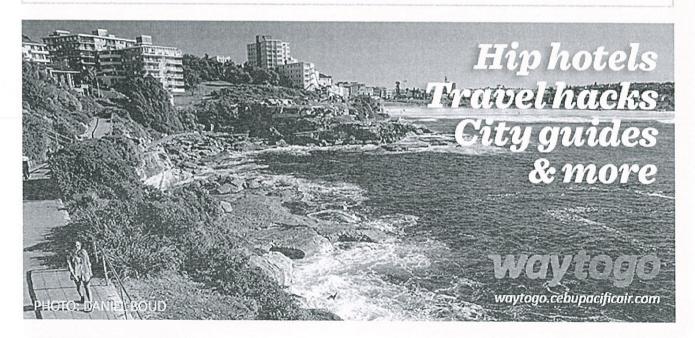
SINGAPORE | SIN Singapore Changi International Airport Terminal 4 Mon. 08 Oct. 2018, 1840H (06:40PM)

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MANILA | MNL Ninoy Aquino International Airport Terminal 3 Mon. 08 Oct. 2018, 2230H (10:30PM)

Reminders

Guests booked on Cebu Pacific's interline partners may need to transfer airport terminals when transiting via Manila. Please proceed to the transit area for the free Manila International Airport Authority shuttle service from 05:30 AM to 01:00 AM of the following day. The MIAA shuttle leaves every 30 to 40 minutes.



Guest Details

Name

Add Ons

1. Ms AIZA AUINGAN CLEMENTE (Adult)

Singapore - Manila 20kg. - Baggage Allowance

Fare Breakdown

Payment Details





Authorisation Form for Foreign Domestic Worker Work Pass Transactions

This authorisation letter shall only be valid for 14 days from the date of employer's authorisation, and only applies to the application / renewal / transfer / cancellation of the foreign domestic worker(s) listed below. To ensure proper authorisation, employers are to indicate <u>NA</u> for rows that are not filled.

*The softcopy of this form contains macros and can only be used with MS Word 2007 version or later. Please print out the PDF version and fill it in hardcopy if you do not have the required software.

Declaration by Employer				
Employer Name	Law Sic Ming	er er beter som stocke kritiske med er stocke statenholde i stocke filmer er		
NRIC No./ FIN	875768152			
Contact No.	92710980	. 0		
Signature and Date		Silver		
S/N Name of Foreig	n Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction	
The second secon	rgan Chemente	0 27724604	Cancellation	
I hereby declare that I am authorising				
Fill in only if applicable. Fill in only if applicable Email: unitedes@singnet.com				
copy of the repro		is enclosed with this authorisa	tion form.	
Thave spoken to and verified with employer to confirm his / her authorisation.				
I have spoken to and verified with employer that the person submitting this form to the EA is authorised to do so on behalf of the employer.				
	nave ensured all necessary	yer. fields are filled in prior to maki	ng the abovementioned	
I declare that th	e information provided on	this form is true and correct.		
Name of EA personn	el	/		
Registration No.	Palr	Palma Sharon Asuncion B1 105865		
Signature and Date	1			