

E-TICKET

Booking Reference

VUMGNF

Booked By: **Myanmar Travel & Tour Singapore**Contact: **SEINN LEI PHYU (Main Branch)**

Reserved On: 24-Jan-2019 12:17

Ticketed On: 24-Jan-2019 12:17

Travellers

Name:	Ticket:	Contact:	Passport:	Outbound:
ZIN / MAR KHAING MS	665 2305 327 901	+65 65353870	Missing	Any seat

Travel Itinerary

Singapore to Yangon

Date	Times	Flight Info		Terminal	Flight Number	Notes
Friday 25-Jan	13:00	Depart	Singapore (SIN)	3	UB-002	B737
	14:30	Arrive	Yangon (RGN)	1	Economy	

Ticket Details

Ticket / Coupon	Flight			Fare Type	Baggage Allowance	Fare Basis	Status
	No	Route	Date				
665 2305 327 901 / 1	UB-002	SIN-RGN	25 Jan 2019	Economy Discount	30kgs	LSGO	OK

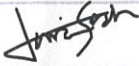



Authorisation Form for Foreign Domestic Worker Work Pass Transactions

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 **NA** 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	SEAH EAH BIN LORRAINE
NRIC No. / FIN	S71 372661
Contact No.	9657 1737
Signature and Date	 20 Jan 2019 

S/N	Name of Foreign Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction
1	ZIN MAR KHAING	094370396	Cancellation
2			

☒ I hereby declare that I am authorising _____ (Name and licence no. of employment agency) to perform the above work pass transaction(s) on my behalf.

Fill in only if applicable.

☐ I hereby authorise _____ (Full name as in NRIC/Passport), _____ (NRIC/Passport No.), to submit this authorisation form on my behalf. A copy of the representative's NRIC/Passport is enclosed with this authorisation form.

Declaration by EA

- ☒ I have 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.
- ☒ I declare that I have ensured all necessary fields are filled in prior to making the abovementioned work pass transactions.
- ☒ I declare that the information provided on this form is true and correct.

Name of EA personnel	Huang Yuling
Registration No.	R1658004
Signature and Date	