TRANSFER TO A LETTERHEAD

DEMAND LETTER

		_) Name and Address of _) Philippine Agent	F
work in			ed of the following workers to your agency to handle the
	ITLE/CATEGORIES	NUMBER REQUIRED	BASIC SALARY (US \$)
1. 2. 3.	TOTAL		
1. 2. 3. 4. 5.	after completion of Free food and according Free transportation of Two years contract. Visa and medical for by the company (FOR DRIVERS ONLY) ✓ The sponsor so vehicle assignentire duration comprehensing comprehension of the comprehension of the complete for the complete for the comprehension of the complete for the complete f	contract. commodation rom accommodation to ees, labour card and al hall secure the driver wi ned to him/her or will be ion of the contract ve vehicle insurance.	I other fees, if any will be paid th accident insurance and the e driven by him/her during the shall be covered by a
7.	and will not c ✓ Meantime the allowances s arrival at the ✓ The employe fails the drive	harge him of expenses i at the driver is securing hall continuously be giv jobsite. r will pay for the repatri	applying for his driver's license ncurred in securing same. his license, his/her salaries and ren to him from the time of his liation cost if in case the driver laws.
		Company Stamp	Very truly yours, Print Name/Signature

Stamp Here