



PT. TRAKINDO UTAMA

Date

D	D	M	M	Y	Y
1	4	0	4	1	8

TRAVEL ASSUREDNESS FORM

Name : Muhammad Arif
Company : PT Trakindo Utama
S.N. : 34489
Department : SHE
Branch : Melak
Division : Northern Kalimantan

Refer to PO. No / Contract Agreement No.
we ensure guarantee to give ticket and or accomodation for :

Name	Company	Destination	Purpose
Laila Puspitasari	Isteri	Samarinda	Pindah Tugas
Azra Nada Aqilah	Anak	Samarinda	Pindah Tugas

All cost for this travel will be charged to:

Customer/Vendor

Company

A/C No. :

Guarantor,

(Muhammad Arif)

Acknowledged by
Travel Section,

(.....)