



PT. TRAKINDO UTAMA

Date

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TRAVEL ASSUREDNESS FORM

Name : **MOHAMAD RUDI SEPTIAN**
Company : **PT. TRAKINDO UTAMA**
S.N. : **31001**
Department : **SERVICE**
Branch : **PALEMBANG**
Division : **SOUTHERN SUMATERA**

Refer to PO. No / Contract Agreement No.

we ensure guarantee to give ticket and or accomodation for :

Name	Company	Destination	Purpose
MOHAMAD RUDI SEPTIAN	TU	JOGJA-PALEMBANG	ANNUAL LEAVE
AJENG LESTARI	TU	JOGJA-PALEMBANG	ANNUAL LEAVE
ALLULA RAYYA KHALISA	TU	JOGJA-PALEMBANG	ANNUAL LEAVE

All cost for this travel will be charged to:

Customer/Vendor

Company

A/C No. : _____

Guarantor,

(M RUDI S)

Verified by,
HR branches

(YUDHISTIRA)

Acknowledged by
Travel Section,

(RATU PUSVITA)

* Re-Route Approval:

POH - SURABAYA

Approved By:

(DEDDY SETYAWAN K)
Branch Manager