(FORM D)

TRANSMITTAL FORM

Name of HK Agency: _____ Agency Code: _____

Name of Phil. Agency: _____

Date Filed: _____

To: PHILIPPINE CONSULATE GENERAL

Submitted herewith for authentication are _____ sets of Employment Contracts.

EMPLOYER NAME	EMPLOYEE NAME	N/R/T	CONTRACT NO.	FOR CONSULATE USE
				Date Submitted: _____
				Date Released: _____
				Date Received: _____
				No. of Sets: _____

_____

NAME OF OWNER/MANAGER & COMPANY CHOP

(Signature over printed name)