DEPLOYMENT LIST

| NAME OF OFW | GENDER | DATE OF BIRTH (MM/DD/YYY) | PASSPORT NUMBER | DATE OF ENTRY IN THE HOST COUNTRY (MM/DD/YYY) | SENDING ORGANIZATION (NAME OF AGENCY, ADDRESS, OWNER, CONTACT NUMBER) | SUPERVISING ORGANIZATION (NAME OF AGENCY, ADDRESS, OWNER, CONTACT NUMBER) | ACCEPTING ORGANIZATION (NAME OF AGENCY, ADDRESS, OWNER, CONTACT NUMBER) | REMARKS |
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