

**TRANSPORTATION REQUEST**

NAME OF CONTINGENT :………………………………………………………………….

DATE OF ARRIVAL : 24 TH September 2018

PICK UP TIME : 9.00 AM

11.00 AM

1.00 PM

AIRPORT : KLIA or KLIA 2

|  |  |  |  |
| --- | --- | --- | --- |
| Name of participants | Passport number | Pick up time | Airport |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |
| 8. |  |  |  |
| 9. |  |  |  |
| 10. |  |  |  |
| 11. |  |  |  |
| 12. |  |  |  |
| 13. |  |  |  |

SENT TO:

ACPES SECRETARIAT 2018

DR. BORHANNUDIN ABDULLAH

borhannudin@upm.edu.my