NOTICE OF EMPLOYMENT OF SPOT EXTRAS

Name of Company:_________________________________________ Tel. No.:________ Fax No.:________
Address:________________________________________________________________________ Email:__________________________
Business Permit or Mayor's Permit No.: __________ Place Issued: __________ Valid until: __________

Data on Employer:
- [ ] Producer
- [ ] Advertiser
- [ ] Ad Agency
- [ ] Talent Caster
- [ ] Talent Agent
- [ ] Talent Manager
- [ ] Others (please specify): __________________________

Title of Project/Activity: __________________________________________
Approximate number of children to be employed as spot extras: ______

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<tr>
<th>Date</th>
<th>Location (Specify exact details)</th>
<th>Duration of Work (Time Start/End)</th>
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I certify that the employment of children indicated herein will be undertaken within the purview of Republic Act No. 9231 and Department Order No. 65-04 and that all the information herein are true and correct to the best of my knowledge.

________________________________________
Printed Name and Signature of Employer

________________________________________
Designation/Position

This form shall be submitted at least two (2) days prior to the shooting/taping/event to the DOLE Regional/Provincial/Field Office having jurisdiction over the workplace of the working child.

ACTION OF DOLE REGIONAL/PROVINCIAL/FIELD OFFICE

Date Received:________________________
Remarks:________________________________________________________________________

________________________________________
Printed Name and Signature of Focal Person

Date:________________________