



MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY	
Pag-IBIG MID NUMBER	121286556694
REGISTRATION TRACKING NUMBER	921219159996

OCCUPATIONAL STATUS		EMPLOYED			
MEMBERSHIP CATEGORY		EMPLOYED - PRIVATE			
PERSONAL DETAILS					
NAME	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME
MEMBER	PERAS	SHEMAIAH HANNAH		FONTANILLA	<input type="checkbox"/>
FATHER	PERAS	JESON		BETONIO	<input type="checkbox"/>
MOTHER (Maiden Name)	FONTANILLA	DYOSIELYN MAY		MOSQUERA	<input type="checkbox"/>
SPOUSE (if Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	PERAS	SHEMAIAH HANNAH		FONTANILLA	<input type="checkbox"/>
DATE OF BIRTH		MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)	
02/08/2001		Single/Unmarried			
PLACE OF BIRTH			CITIZENSHIP		SSS NUMBER
MANILA METRO MANILA (NCR)			FILIPINO		3508909121
SEX	HEIGHT(cm)	WEIGHT(kg)	PROMINENT DISTINGUISHING FACIAL FEATURES		
FEMALE	170 00	65 00			
COMMON REFERENCE NUMBER (CRN)			FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		GSIS NUMBER
					EMPLOYEE NUMBER
					For AFP/PNP Employee: Senal/Badge No
					For DepEd Employee: Division Code-Station Code

ADDRESS AND CONTACT DETAILS

PERMANENT HOME ADDRESS					COUNTRY + AREA CODE + TELEPHONE NUMBER	
Unit/Room No. Floor		Building Name			Home	
Lot No.	Block No.	Phase No.	House No.	Street Name	Cell Phone	
3	7	2			+63 (0956) 9924718	
Subdivision		Barangay			Business (Direct Line)	
TIERRA GRANDE		LAWAAN 1				
Municipality/City		Province/State/Country			Business (Trunk Line)	
TALISAY CITY		CEBU, PHILIPPINES				
ZIP Code					Email Address	
6045					perasshemaiah@gmail.com	

PRESENT HOME ADDRESS						
Unit/Room No. Floor		Building Name		Lot no.	Block no.	Phase No.
				3	7	2
House No.		Street Name		Subdivision		Barangay
				TIERRA GRANDE		LAWAAN 1
Municipality/City		Province/State/Country		ZIP Code		
TALISAY CITY		CEBU, PHILIPPINES		6045		
REFERRED MAILING ADDRESS		PRESENT HOME ADDRESS				

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.



MEMBER DATA RECORD

MEMBER BASIC INFORMATION

PhilHealth Identification Number (PIN) : 12-250984304-8 PhilSys Number :
 Member Category : SPONSORED - POS-
 Sub-Category FINANCIALLY INCAPABLE NHTS Coverage : EXISTING
 Validity Period : 01/07/2022 - 12/31/2022

PERAS, SHEMAIAH HANNAH FONTANILLA

LT3 BLK7 LESSANDRA ROMA LAWAAN I, TALISAY CEBU

Foreign Address : N/A Sex : FEMALE
 Date of Birth : 02/08/2001
 Place of Birth : TONDO, NCR, CITY OF MANILA,
 FIRST DISTRICT
 Contact No. (Foreign) : N/A Civil Status : SINGLE
 (Local) : +639569924718 Tax Identification Number :

ENTITY INFORMATION

PhilHealth Number (PEN/POGN) : N/A
 Name of Employer/Organized Group : N/A
 Business Address : N/A
 Telephone Number : N/A Employment Status :
 Tax Identification Number : N/A Date : N/A

DEPENDENT INFORMATION

PIN	Surname	Given Name	Middle Name	Sex	Relation	Date of Birth
-----	---------	------------	-------------	-----	----------	---------------

*** NOTHING FOLLOWS ***

MARJORIE A. CABRIETO
 REGIONAL VICE PRESIDENT
 PRO - VII Cebu City

Paalala: Basahin ang nilalaman ng MDR. Kung may kulang o mali, ibalik agad upang maiwasto. Ingatan ang orihinal na kopya at huwag ibigay kahit kanino. Kung sakaling gagamit at makikinabang ng benepisyo, magbigay ng kopya sa ospital. (Reminder: Read the contents of the MDR. Should there be any data discrepancies, return it back to amend or rectify the error. Take good care of MDR and do not hand it over to anybody. Provide photocopy to hospital in case of confinement and availment of benefits.)

This is a Member Portal System generated report. Signature is not required.

Sep 21, 2022 01:35 PM



PERAS, SHEMAIAH HANNAH FONTANILLA

SS Number: 35-0890912-1

Your password will expire on Mar 16, 2023 | Your last login was on Sep 20, 2022 1:00:32 PM thru the SSS Website

[HOME](#)

[MEMBER INFO](#)

[INQUIRY](#)

[E-SERVICES](#)

[PAYMENT REFERENCE NUMBER \(PRN\) - CONTRIBUTIONS](#)

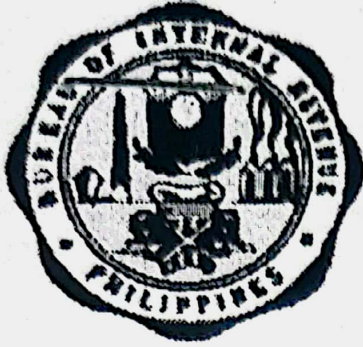
[PRN - LOANS](#)

[LOGOUT](#)

Member Details

+ Address & Contact Information

SS Number Status :	0 - ACTIVE
Document Compliance :	DOCUMENTARY REQUIREMENT(S) SUBMITTED
Membership Status :	PERMANENT
Prior Registrant :	NO
Date of SS Number Issuance :	08/05/2021
Sex :	FEMALE
Reporting Date :	
Reporting ID :	
Latest ER ID :	
Latest ER Name :	
Claim Flag Status :	0 - NO FINAL/FUNERAL CLAIM
Transferred to (New SS Number) :	
Membership Type :	EMPLOYEE
Change in Coverage Status	NO STATUS CHANGE
Date of Loan Disqualification	
SS Number Withdrawal Reason	
Record Location	TALISAY
TIN Number	



Republic of the Philippines
Department of Finance
BUREAU OF INTERNAL REVENUE
Office of the Revenue District Officer
Revenue District No. 083
Talisay City

TIN VERIFICATION Query Results

TIN: 503 - 271 - 358 - 000 RDO CODE: 043

NAME: JHEMAIAH HANNAH FONTAMILLA PERAS

(First name, full middle name, last name)

DATE of BIRTH: FEB 08, 2001

ADDRESS: LAWAAN 1, TALISAY CITY

TAXPAYER

CLASSIFICATION: Local Employee

VERIFIED BY: SEP 21 2024

Attachment: (Any of the following)

- Any valid I.D. (Passport, Comelec, LTO License, Company I.D., Philhealth)
- Birth Certificate or Marriage Cert.
- Any Documents showing Name, Address & Birthdate of Taxpayer

PERIOD OF RESIDENCE IN :

Municipality :

11 year(s)