



HQP-PFF-039
(V10, 04/2023)

MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY	
Pag-IBIG MID NO.	121333842897
REGISTRATION TRACKING NO.	924008371578

OCCUPATIONAL STATUS EMPLOYED					
MEMBERSHIP CATEGORY EMPLOYED - PRIVATE Please specify					
PERSONAL DETAILS					
NAME	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME
MEMBER	BAUTISTA	YANZY FATE		FLORES	<input type="checkbox"/>
FATHER	BAUTISTA	RODNEY		NAÑOS	<input type="checkbox"/>
MOTHER (Maiden Name)	FLORES	YELDA		PALOMARES	<input type="checkbox"/>
SPOUSE (if Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	BAUTISTA	YANZY FATE		FLORES	<input type="checkbox"/>
DATE OF BIRTH 03/22/2003		MARITAL STATUS Single/Unmarried		TAXPAYER IDENTIFICATION NUMBER (TIN)	
PLACE OF BIRTH CEBU CITY, CEBU		CITIZENSHIP FILIPINO		SSS NUMBER 0647155936	
SEX FEMALE	HEIGHT(cm) 162.56	WEIGHT(kg) 68.00	PROMINENT DISTINGUISHING FACIAL FEATURES		GSIS NUMBER 4378
COMMON REFERENCE NUMBER (CRN)		FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		EMPLOYEE NUMBER 4378 <i>For AFP/PNP Employee, Serial/Badge No.</i> <i>For DepEd Employee, Division Code-Station Code</i>	

ADDRESS AND CONTACT DETAILS						
PERMANENT HOME ADDRESS					COUNTRY + AREA CODE + TELEPHONE NUMBER	
Unit/Room No., Floor		Building Name			Home	
Lot No., 20	Block No., 7	Phase No., 2B	House No.	Street Name NARRA	Cell Phone +63 (0995) 2940064	
Subdivision VILLA LEYSON		Barangay BACAYAN			Business (Direct Line)	
Municipality/City CEBU CITY		Province/State/Country CEBU, PHILIPPINES			Business (Trunk Line)	
ZIP Code 6000					Email Address yanzyfatebautista@gmail.com	
PRESENT HOME ADDRESS						
Unit/Room No., Floor		Building Name		Lot No., 20	Block No., 7	Phase No., 2B
House No.		Street Name NARRA		Subdivision VILLA LEYSON		Barangay BACAYAN
Municipality/City CEBU CITY		Province/State/Country CEBU, PHILIPPINES			ZIP Code 6000	
PREFERRED MAILING ADDRESS			PERMANENT HOME ADDRESS			

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.

PRESENT EMPLOYMENT DETAILS					
OCCUPATION CUSTOMER SERVICE REPRESENTATIVES			EMPLOYMENT STATUS PERMANENT/REGULAR	TYPE OF WORK	
EMPLOYER/BUSINESS NAME IFLOY OFS			COUNTRY OF ASSIGNMENT		
EMPLOYER/BUSINESS ADDRESS			MONTHLY INCOME		
Unit/Room No., Floor	Building Name		Basic		0.00
Lot No.	Block No.	Phase No.	House No.	Street Name	Allowances/Others
Subdivision			Barangay		Total Mo. Income
Municipality/City CEBU CITY			Province CEBU		0.00
State/Country (if abroad) PHILIPPINES			ZIP Code 6000	DATE EMPLOYED JAN 2024	

PREVIOUS EMPLOYMENT FROM DATE OF Pag-IBIG MEMBERSHIP		
EMPLOYER/BUSINESS NAME	OFFICE ASSIGNMENT	
EMPLOYER/BUSINESS ADDRESS	FROM	TO

HEIRS					
LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME RELATIONSHIP	DATE OF BIRTH
[]					

CERTIFICATION	
<p>I hereby certify that the information given, and all statements made herein are true and correct. Likewise, I hereby authorize Pag-IBIG Fund to collect record, organize, update/modify, consult, use, consolidate, block, erase or destruct my personal data as part of my information. I hereby affirm my right to: (a) be informed; (b) object to processing; (c) access; (d) rectify, suspend or withdraw my personal data; (e) damages; and (f) data portability pursuant to the provision of R.A. No. 10173 (Data Privacy Act of 2012).</p>	
SIGNATURE OF INFORMANT	DATE
FOR Pag-IBIG FUND USE ONLY	
RECEIVED BY	DATE
Signature over Printed Name	Designation/Position
	Branch/Unit

DISCLAIMER

Membership registration with the Fund does not automatically qualify a Pag-IBIG member to avail of the Fund's various programs. A Pag-IBIG member must satisfy the eligibility requirements and comply with the documentary requirements, which is subject to verification and approval.

DMF - CEBU AYALA BRANC
RECEIVED

BY: Eisen Fhredritz R. Manuel
Marketing and Customer Support Assistant

DATE: JAN 23 2024