

**CONFIDENTIAL**  
**Personnel Change Notice (PCN)**

**GENERAL DETAILS**

|                                      |  |
|--------------------------------------|--|
| Employee Number: <b>4495</b>         | Control Number: <b>4495 (2)</b>            |
| Full Name: <b>Dianna Jane Asenjo</b> | Supersedes Control Number: <b>4495 (1)</b> |
| Hire Date: <b>February 7, 2024</b>   | Department: <b>60 MC Restart</b>           |

**NATURE OF NOTICE**

- |  |  |
|--|--|
| <input type="checkbox"/> Regularization    | <input checked="" type="checkbox"/> Merit Increase |
| <input type="checkbox"/> Promotion         | <input type="checkbox"/> Salary Adjustment         |
| <input type="checkbox"/> Internal Transfer | <input type="checkbox"/> Others (please specify)   |
| <input type="checkbox"/> Salary Increase   |  |

**EFFECTIVE DATE OF THIS PCN**

**March 30, 2025**

**DEFINITION OF SCOPE**

| FACTORS   | FROM                            | TO               |
|---|---------------------------------|------------------|
| JOB TITLE   | Customer Service Representative | Same             |
| JOB LEVEL   | Rank & File                     | Same             |
| EMPLOYMENT STATUS   | Regular                         | Same             |
| MONTHLY BASIC SALARY  | 16,000.00                       | <b>17,500.00</b> |
| ALLOWANCE   | 2,400.00                        | Same             |
| HMO   | Yes                             | Same             |
| IMMEDIATE SUPERIOR  | Fatima Alpuerto Benido          | Same             |
| DEPARTMENT  | 60 MC Restart                   | Same             |
| <b>REMINDERS:</b>   |                                 |                  |
| <p><i>For HMO, be reminded that in the event of separation, you can no longer use your insurance effective on the separation date. The Company reserves the right to deduct from your last pay the remaining quarterly premium that was covered. The quarters are as follows:</i></p> <p><i>1st Quarter – December, January, and February</i><br/> <i>2nd Quarter – March, April, and May</i><br/> <i>3rd Quarter – June, July, and August</i><br/> <i>4th Quarter – September, October, and November</i></p> |                                 |                  |

*\*This PCN supersedes all stipulations pertaining to the compensation & benefits package stated in the job offer &/or employment Contract signed by the employee.*

|   |   |   |   |
|---|---|---|---|
| Prepared by:<br><br><b>Margarita Cane Silva</b><br>ER Specialist | Reviewed by:<br><br><b>Rameyn Castanares</b><br>HR Manager | Noted by:<br><br><b>Niño Angelo Quinal Manal</b><br>Operations Manager | Approved by:<br><br><b>Alfredo "Doc" Camarillo Jr.</b><br>Director of Operations |
|---|---|---|---|

Conforme:

  
**Dianna Jane Asenjo**  
 Employee's Name & Signature