



HEAD OFFICE: 6008 J.S. Cabahug St., Pagsabungan Mandaue, Philippines  
Contact: L: (032) 326 0257 / (032) 2664052 / E: [info@skimmate.ph](mailto:info@skimmate.ph)

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## CERTIFICATE OF EMPLOYMENT

This is to certify that MS. ANGELIKA T. COGAL has been an employee of SEVEN ELEVEN THE SPACE as SALES AREA MAINTENANCE since FEBRUARY 2, 2020 up to AUGUST 1, 2021.

Ms. Cogal receives the mandatory benefits and provisions provided by Law.

All above shown is approved by the authorized person in this Company.

Issued this 13th day of October 2021, Mandaue City, Philippines.

Signed By:

LEONHARDT JOHN C. CABAUG  
OWNER/PRESIDENT



BIR Form No.  
**2316**  
September 2021(ENCS)

**Certificate of Compensation  
Payment/Tax Withheld**  
For Compensation Payment With or Without Tax Withheld



2316 9/21ENCS

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

1 For the Year (YYYY) **2 0 2 4** 2 For the Period From (MM/DD) **0 1 0 1** To (MM/DD) **1 2 3 1**

**Part I - Employee Information**

3 TIN **3 6 0 - 6 0 7 - 1 5 2 - 0 0 0 0 0**

4 Employee's Name (Last Name, First Name, Middle Name) **COGAL, MA ANGELIKA TABLATIN** 5 RDO Code

6 Registered Address **Purok 4 Mt. Breeze Argawanon San Remigio Cebu** 6A ZIP Code

6B Local Home Address **Purok 4 Mt. Breeze Argawanon San Remigio Cebu** 6C ZIP Code

6D Foreign Address

7 Date of Birth (MM/DD/YYYY) **1 0 1 7 2 0 0 0** 8 Contact Number

9 Statutory Minimum Wage rate per day

10 Statutory Minimum Wage rate per month

11  Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax

**Part II - Employer Information (Present)**

12 TIN **0 0 5 - 0 5 7 - 1 8 1 - 0 0 0 0**

13 Employer's Name **FOUNDEVER ASIA, INC.**

14 Registered Address **10th F. Glorietta Corporate Tower 1, Palm Drive, Ayala Center, Makati City, Philippines** 14A ZIP Code **1 2 2 4**

15 Type of Employer  Main Employer  Secondary Employer

**Part III - Employer Information (Previous)**

16 TIN

17 Employer's Name

18 Registered Address 18A ZIP Code

**Part IVA - Summary**

19 Gross Compensation Income from Present Employer (Sum of Items 38 and 52) **12,035.56**

20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) **12,035.56**

21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) **0.00**

22 Add: Taxable Compensation Income from Previous Employer, if applicable **0.00**

23 Gross Taxable Compensation Income (Sum of Items 21 and 22) **0.00**

24 Tax Due **0.00**

25 Amount of Taxes Withheld

25A Present Employer **0.00**

25B Previous Employer, if applicable **0.00**

26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) **0.00**

27 5% Tax Credit (PERA Act of 2008) **0.00**

28 Total Taxes Withheld (Item 26 less Item 27) **0.00**

**Part IV-B Details of Compensation Income & Tax Withheld from Present Employer**

	Amount
<b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b>	
29 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)	9,871.98
30 Holiday Pay (MWE)	0.00
31 Overtime Pay (MWE)	0.00
32 Night Shift Differential (MWE)	0.00
33 Hazard Pay (MWE)	0.00
34 13th Month Pay and Other Benefits (maximum of P90,000)	0.00
35 De Minimis Benefits	1,150.00
36 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)	1,013.58
37 Salaries and Other Forms of Compensation	0.00
38 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37)	12,035.56
<b>B. TAXABLE COMPENSATION INCOME REGULAR</b>	
39 Basic Salary	0.00
40 Representation	0.00
41 Transportation	0.00
42 Cost of Living Allowance (COLA)	0.00
43 Fixed Housing Allowance	0.00
44 Others (specify)	
44A	0.00
44B	0.00
<b>SUPPLEMENTARY</b>	
45 Commission	0.00
46 Profit Sharing	0.00
47 Fees Including Director's Fees	0.00
48 Taxable 13th Month Benefits	0.00
49 Hazard Pay	0.00
50 Overtime Pay	0.00
51 Others (specify)	
51A Salaries and other form of compensation	0.00
51B	0.00
52 Total Taxable Compensation Income (Sum of Items 39 to 51B)	0.00

I/We declare, under the penalties of perjury that this certificate has been made in good faith, verified by me/us, and to the best of my/our knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I/we give my/our consent to the processing of my/our information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

53 PORTULA, RONALD PONFERRADA / Director TT - Tax Compliance Date Signed \_\_\_\_\_  
Present Employer/Authorized Agent Signature over Printed Name

CONFORME:

54 COGAL, MA ANGELIKA TABLATIN Date Signed \_\_\_\_\_  
Employee Signature over Printed Name

CTC/Valid ID No. \_\_\_\_\_ Place of \_\_\_\_\_ Date Issued \_\_\_\_\_  
of Employee Issue

Amount paid, if CTC \_\_\_\_\_

**To be accomplished under substituted filing**

I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.

55 PORTULA, RONALD PONFERRADA / Director TT - Tax Compliance  
Present Employer/Authorized Agent Signature over Printed Name  
(Head of Accounting/ Human Resource or Authorized Representative)

I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.

56 COGAL, MA ANGELIKA TABLATIN  
Employee Signature over Printed Name

\*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)



Republic of the Philippines  
Province of Cebu  
MANDAUE CITY



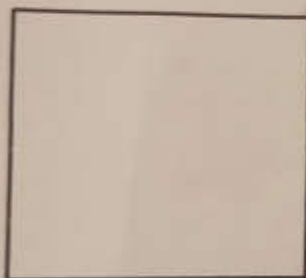
BARANGAY MAGUIKAY  
Tel. No. 345-1028

OFFICE OF THE PUNONG BARANGAY

## BARANGAY CERTIFICATION

This is to certify that the person whose name, picture and signature appeared herein has requested a BARANGAY CLEARANCE from this office.

COMPLETE NAME: MA. ANGELIKA TABLATIN COGAL GENDER: FEMALE  
ADDRESS: M.D. ECHAVEZ ST., SUDLON, MAGUIKAY, MANDAUE CITY DATE OF BIRTH: OCTOBER 17, 2000  
CIVIL STATUS: SINGLE PLACE OF BIRTH: METRO MANILA  
PURPOSE: EMPLOYMENT



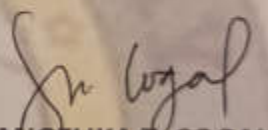
Picture



Left Thumb



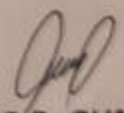
Right Thumb

  
MA. ANGELIKA T. COGAL

Signature over printed name

It is further certified that the above mentioned name is a law-abiding citizen of good moral character. He/she is residing for \_\_\_\_\_ months/years in this barangay.

Issued this 21<sup>ST</sup> day of MAY 2024 at barangay Maguikay, Mandaue City, Cebu, Philippines.

  
EDUARDO B. GUMERA  
Punong Barangay

OR Number: 10416433  
Amount Paid: 50.00  
Doc. Stamp: 30.00

Not valid if there is no official dry seal  
This clearance is good until NOVEMBER 21, 2024, revocable for cause

## CERTIFICATE OF EMPLOYMENT

This is to certify that **Angelika Cogal** has been an employee of **VCUSTOMER CEBU, INC. (a Tech Mahindra Ltd. Company)** from **October 22, 2021** to **December 27, 2021**. He/she held the position of **Associate-Customer Support**.

This certification is being issued upon the request of **Angelika Cogal** for reference of employment with the Company. **VCUSTOMER CEBU, INC** shall not be held liable if this certification is used other than the purpose indicated. For inquiries, you may email us to [CebuER@TechMahindra.com](mailto:CebuER@TechMahindra.com).

Issued on **December 30, 2021**

**Issued by:**



**REYNALDO BELUSO II, JD.**  
Manager, Human Resources



Republika ng Pilipinas  
*Republic of the Philippines*  
Kagawaran ng Edukasyon  
*Department of Education*

REHIYON VII  
*Region VII*

Sangay ng Cebu  
*Division of Cebu*

Purok ng San Remigio I  
*District of San Remigio I*



**SAN REMIGIO NATIONAL HIGH SCHOOL**

Paaralan  
*School*

Pinatutunayan nito na si  
*This certifies that*

**MA ANGELIKA T. COGAL**

*Learner Reference Number (LRN): 303087130050*

ay kasiya-siyang nakatupad sa mga kinakailangan sa pagtatapos ng Senior High School  
*has satisfactorily completed the requirements for graduation in Senior High School*

**ACADEMIC TRACK**

**ACCOUNTANCY, BUSINESS AND MANAGEMENT (ABM) STRAND**

Na itinakda para sa Magsas na Paaralan ng Kagawaran ng Edukasyon, kaya pinagkalooban siya nitong  
*prescribed for Secondary Schools of the Department of Education and is therefore awarded this*

**KATIBAYAN**

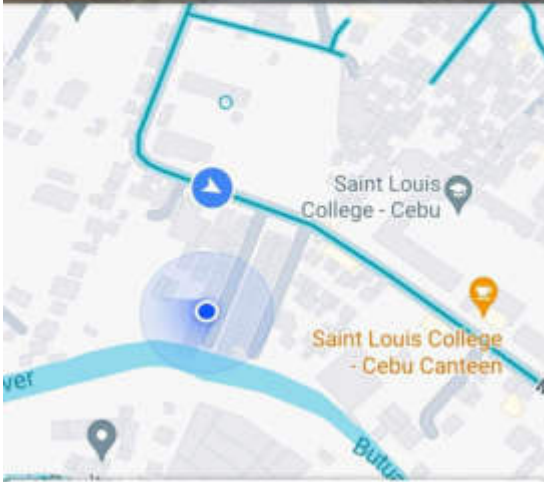
*DIPLOMA*

Nilagdaan sa Poblacion, San Remigio, Cebu, Pilipinas nitong ika-5 ng Abril 2019,  
*Signed in Poblacion, San Remigio, Cebu, Philippines on the 5<sup>th</sup> day of April 2019.*

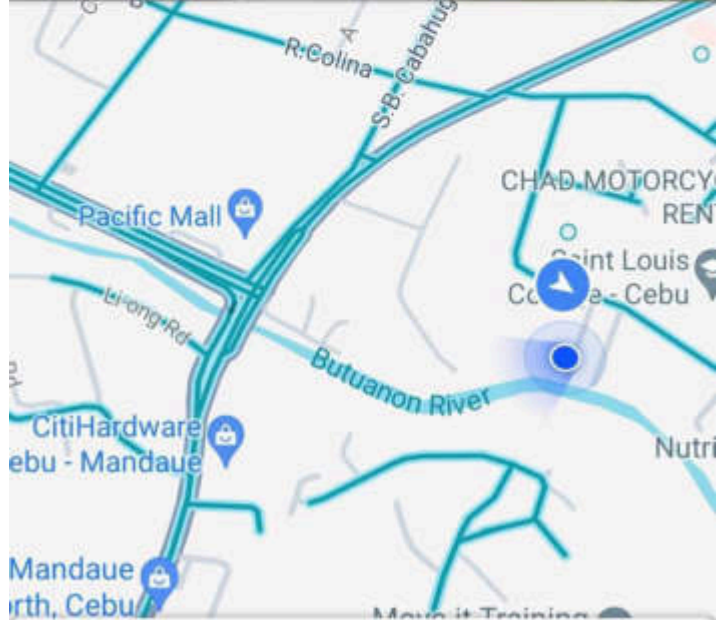
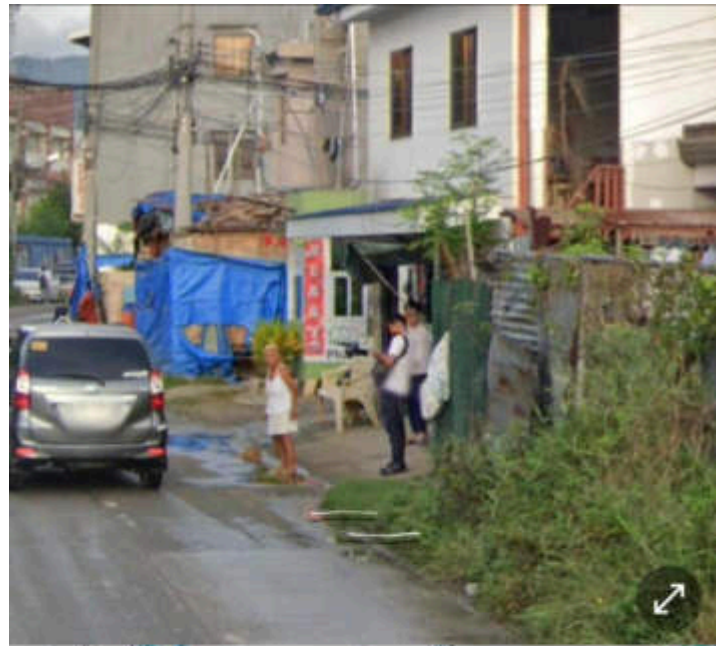
**REYNALDO D. DELA PAMA**  
*Pangangguro*  
*Principal*

**RHEA MAR A. ANGTUD, Ed.D., CESO VI**  
*Pangangguro na Tagapamanihala ng mga Paaralan*  
*Schools Division Superintendent*

**Karl's Town 2, Phase 1 Unit 8, Sudlon Maguikay, Mandaue City 6014**



M.D.Echavez  
a year ago · See more dates >



M.D.Echavez  
a year ago · See more dates >



M.D.Echavez  
a year ago · See more dates >



**Medgruppe Polyclinics & Diagnostic Center, Inc.**  
 2nd Level, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City  
 Tel # (032) 232-2273/266-3245  
 www.primecarealpha.ph

**SERVICE ORDER**



**BILL TO :**

**[000160] IPLOY STAFFING SOLUTIONS**  
 CEBU CITY, CEBU PHILIPPINES 6000, Cebu City (Capital), Cebu

Priority No.	0006
SO No.	462815
S.O Date	05/20/2024
Terms	30 Days
Amount Due	P800.00

**PATIENT INFORMATION**

**PATIENT ID** : 065770  
**PATIENT NAME** : COGAL, MA. ANGELIKA , TABLATIN  
**PATIENT ADDRESS** : Maguikay, Mandaue City, Cebu  
**MOBILE NO.** : 09057310187  
**EMAIL ADDRESS** : ACOGAL17@GMAIL.COM  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY

**GENDER** : Female  
**BIRTHDATE** : 10/17/2000  
**AGE** : 23  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME »PE CHEST PA CBC UA SE W DRUG TEST (NOTE) PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1.00	800.00	800.00	TOTAL SALES : 800.00 VATABLE SALES : 0.00 V-A-T : 0.00 SC/PWD DISCOUNT : 0.00 AMOUNT DUE : 800.00

**Prime CARE**

<b>PREPARED BY:</b> Floren A. Manigos	<b>ACKNOWLEDGED BY:</b> <i>[Signature]</i> Signature Over Printed Name	<b>VALIDATED</b> <b>BY:</b> <i>[Signature]</i> Signature Over Printed Name
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I acknowledge that I was duly informed by Prime Care Alpha employee to pay the above mentioned tests, I have reviewed the prices listed on the (SO) and agree to the changes associated with the products and services.

Date Created: 05/20/2024 07:46 AM

\*\*\*\* THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM \*\*\*\*



Republic of the Philippines  
Department of Justice  
National Bureau of Investigation



39417842

This is to certify that the person whose name, picture, signature and thumbprint appearing below applied for NBI Clearance and the results is as follows:

NBI ID NO. <b>C240JMQA00-R71560885</b>	VALID UNTIL <b>March 01, 2025</b>
FAMILY NAME <b>COGAL</b>	FIRST NAME <b>MA ANGELIKA</b>
MIDDLE NAME <b>TABLATIN</b>	HUSBAND'S SURNAME
ADDRESS <b>SUDLON MAGUIKAY MANDAUE CITY CEBU</b>	
DATE OF BIRTH <b>October 17, 2000</b>	PLACE OF BIRTH <b>MANILA</b>
CITIZENSHIP <b>FILIPINO</b>	CIVIL STATUS <b>SINGLE</b>
PURPOSE <b>MULTI-PURPOSE CLEARANCE</b>	GENDER <b>FEMALE</b>
REMARKS <b>NO DEROGATORY RECORD</b>	



SIGNATURE  
*MA ANGELIKA COGAL*



Date Printed: Thursday, March 14, 2024 11:34 AM



C240JMQA00-R71560885

*Medardo G. de Lemos*  
ATTY. MEDARDO G. DE LEMOS  
Director

Agency	R7	DATID	villarinn
CASID	villarinn	BIOID	villarinn
O R No.	NP7AXG9XQC	RECID	belent2
O R Date	03/01/2024 11:44:23 AM	INTID	
DST PAID		PRTID	villarinn