



Mandaue Plastic Company



h's Eatery

Silogan sa Opao
Not busy



Don Macchiatos
- Opao Branch



Don Vito & Bros. Coffee



Don Gerardo Ouano
Llamera Memorial...



Julie's
Opao,



PATTOY'S STORE

Hea
kor

UCLM GATE 9





Manila Form No. 102
(Revised January 1995)

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly. Use ink or typewriter.
Place X before the appropriate answer in items 2, 5a, 5b, and 10a.)

Province Cebu City/Municipality Cebu City Registry No. 96-6112

1. NAME (First) CHRISTIAN (Middle) (Last) ENTRAMPAS
2. SEX 1 Male 2 Female 3. DATE OF BIRTH (day) (month) (year) 12 March 1996
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province) Cebu Free Center & Maternity House, Inc. Cebu City, Cebu
5a. TYPE OF BIRTH 1 Single 2 Twin 3 Triplets, etc. b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Others, Specify
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) second d. WEIGHT AT BIRTH 3100 grams

6. MARDEN NAME (First) JENNIFER (Middle) VILLEGAS (Last) ENTRAMPAS
7. CITIZENSHIP Phil. 8. RELIGION Roman Catholic
9a. Total number of children born alive: 2 b. No. of children still living including this birth: 2 c. No. of children born alive but are now dead: 0
10. OCCUPATION None 11. Age at the time of this birth: 92 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) Opao Mandaue City Cebu

13. NAME (First) (Middle) (Last) unknown
14. CITIZENSHIP NA 15. RELIGION NA
16. OCCUPATION NA 17. Age at the date of this birth: NA years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (if not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)
NOT APPLICABLE

19a. ATTENDANT 1 Physician 2 Nurse 3 Midwife 4 Hilot (Traditional Midwife) 5 Others (Specify)

19b. CERTIFICATION OF BIRTH
I hereby certify that I attended the birth of the child who was born alive at 11:06 o'clock am/pm on the date stated above.

Signature NONI EDAD MELGAR, M.D. Title of Position Physician Date March 12, 1996
Cebu Free Center & Maternity House, Inc., Cebu City

20. INFORMANT
Signature Jennifer Entrampas Address Opao, Mandaue City
Name in Print JENNIFER ENTRAMPAS Date March 12, 1996
Relationship to the child mother

21. PREPARED BY
Signature MARIANELLA C. MORALES Title of Position clerk Date March 12, 1996
22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature ADA A. P... Title of Position CLERK Date APR 03 1996

Handwritten notes and stamps in the Remarks/Annotation column, including dates like 9/20/96, 2/2/98, 012 2/1/90, 03 02 00, 090 312, 02 311, and 03 02 00.



Republic of the Philippines
Department of Justice
National Bureau of Investigation



40012170

VALID UNTIL
E538CCLN69-ND4625209
FAMILY NAME
ENTRAMPAS
MIDDLE NAME

VALID UNTIL
May 20, 2025
FIRST NAME
CHRISTIAN
HUSBAND'S SURNAME



ADDRESS
SITIO WALING WALING BRGY OPAO MANDAUE CITY CEBU
PLACE OF BIRTH
March 12, 1994
CITIZENSHIP
FILIPINO

PLACE OF BIRTH
MANDAUE CITY CEBU
CIVIL STATUS
SINGLE

GENDER
MALE

MULTI-PURPOSE CLEARANCE
REMARKS
NO RECORD ON FILE



Date Printed: Monday, 20 May 2024 09:11 am

Agency	ND4	DAYID	minguez
CASID	minguez	SOID	minguez
C.R. No.	2HW7MMAD	RECD	
C.H. Date	05/20/2024 9:41:08 am	INTD	
DST PAID		PRTD	minguez



E538CCLN69-ND4625209

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



Republic of the Philippines
Department of Justice
National Bureau of Investigation



40012170

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SINGLE

GENDER
MALE

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REMARKS
NO RECORD ON FILE

PERSONAL COPY



Date Printed: Monday, 20 May 2024 09:11 am

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E538CCLN69-ND4625209

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



MEMBER DATA RECORD

MEMBER INFORMATION

PhilHealth Identification Number (PIN) : 122031988959
 Member Category : INDIGENT
 Sub-Category : NHTS-PR
 NHTS Coverage :
 Effectivity Period : 01/01/2020 - 12/31/2020

ENTRAMPAS, CHRISTIAN
 OPAO, MANDAUE CITY, CEBU 6014

Foreign Address : N/A
 Sex : Male
 Date of Birth : 03/12/1996
 Place of Birth : MANDAUE CITY, CEBU
 Contact No. (Foreign) : N/A
 (Local) :
 Civil Status : SINGLE
 Tax Identification Number :

EMPLOYER/ORGANIZED GROUP INFORMATION

Philhealth Number (PEN/POGN) : 400120001245
 Name of Employer/Organized Group : CITY GOVERNMENT OF MANDAUE
 Business Address : CENTRO (POB.), MANDAUE CITY, CEBU
 Telephone Number : N/A
 Tax Identification Number : N/A

DEPENDENT INFORMATION

PIN	Surname	Given Name	Middle Name	Sex	Relation	Date of Birth
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*** NO DECLARED DEPENDENT/S ***

*** NOTHING FOLLOWS ***

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

1. "Ako ay miyembro ng PhilHealth na may benepisyong pangkalusugan."
2. "Sakop ng aking benepisyo ang aking asawa, mga anak na may edad 20 taon pababa at magulang na may edad 60 taon pataas."
3. "Wala kaming babayaran sa mga pangunahing operasyon at karamdaman kung magpapa-confine kami sa ward ng mga pampublikong ospital."
4. "Sagot ng PhilHealth ang konsultasyon, laboratory at ilan pang serbisyo ng aking pamilya mula sa aming health center."
5. "Kailangan ko lamang ipakita ang aking Health Insurance Card o Member Data Record kapag gagamit ng benepisyo."

ITAGO ANG ORIHINAL NA MDR. MAGBIGAY NG KOPYA SA OSPITAL O HEALTH CENTER KUNG

This is a system generated report. Signature is not required.



MEMBER'S DATA FORM (MDF)

HQP-MFF-029
(V10, 04/2020)

FOR Pag-IBIG Fund Users ONLY

Pag-IBIG MID NO.

121341021824

REGISTRATION TRACKING NO.

924126721959

OCCUPATIONAL STATUS		UNEMPLOYED/NOT YET EMPLOYED	
MEMBERSHIP CATEGORY		Please specify	
PERSONAL DETAILS			
NAME	LAST NAME	FIRST NAME	NO. MIDDLE NAME
MEMBER	ENTRAMPAS	CHRISTIAN	<input type="checkbox"/>
FATHER			<input type="checkbox"/>
MOTHER (Maiden Name)	ENTRAMPAS	JENNIFER	<input type="checkbox"/>
SPOUSE (If Married)			<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	ENTRAMPAS	CHRISTIAN	<input checked="" type="checkbox"/>
DATE OF BIRTH	MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)
03/12/1995	Single/Unmarried		
PLACE OF BIRTH	CITIZENSHIP		SSS NUMBER
MANDAUE CITY, CEBU	FILIPINO		GSIS NUMBER
SEX	HEIGHT (cm)	WEIGHT (kg)	PROMINENT DISTINGUISHING FACIAL FEATURES
MALE	0.00	0.00	
COMMON REFERENCE NUMBER (CRN)	FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		EMPLOYEE NUMBER For AFP/PNP Employee, Service/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.	Cell Phone
			+63 (0599) 5886347
Subdivision	Barangay		Business (Direct Line)
	OPAO		
Municipality/City	Province/State/Country		Business (Trunk Line)
MANDAUE CITY	CEBU, PHILIPPINES		
ZIP Code			Email Address
6014			chrspas96@gmail.com
PRESENT HOME ADDRESS			
Unit/Room No. / Floor	Building Name	Lot No.	Block No.
			Phase No.
House No.	Street Name	Subdivision	Barangay
	G OUANO		OPAO
Municipality/City	Province/State/Country		ZIP Code
MANDAUE CITY	CEBU, PHILIPPINES		6014
PREFERRED MAILING ADDRESS	PRESENT HOME ADDRESS		

THIS FORM MAY BE REPRODUCED, NOT FOR SALE.



REPUBLIC OF THE PHILIPPINES
PROVINCE OF CEBU
CITY OF MANDAUE
BARANGAY OPAO



OFFICE OF THE PUNONG BARANGAY

To whom it may concern,

This is to certify that Christian Entrampas, 28 yrs. old, Single a bonafide resident of Purok Waling-waling, Opao, Mandaue City, Cebu, Philippines.

He/She is a duly registered Barangay Assembly member and is therefore under my jurisdiction and under my administrative function. This is to certify further that he/she is personally known to be a person of good moral character, peace loving, law abiding and has no derogatory records in our community.

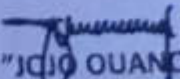
This certification is issued upon the request of Mr. Entrampas in connection with his/her intention to secure for Employment and other legal purposes that this may serve him/her best.

Done this **20th day of May 2024** at Opao Barangay Hall, Opao, Mandaue City, Cebu, Philippines.



Hon. Allan B. Frias
Hon. Jayvee C. Armamento
Hon. Rene M. Regudo
Hon. Adonis O. Icalina
Hon. Joannah Marie B. Macalooloy
Hon. Dexter P. Naparate
Hon. Marie Fedelis O. Cuizon
Hon. Kyle Andreev H. Semblante

Cert. Fee: P 80.00
O.R. no.: 10423090
Precinct: 0568-A


NIXON "JCJO OUANO" T. DIZON
Punong Barangay

NOTE: Any appearance of erasure or alteration in the above entry will render certificate null void.

ACEBEDO OPTICAL
FREE EYE CHECK-UP

3rd floor, in front of
 Jovy Gaming Hub

RIGHT EYE:

LEFT EYE:

STAFFING SOLUTIONS
 CEBU CITY, CEBU PHILIPPINES 6000, Cebu City (Capital), Cebu

Polyclinics & Diagnostic Center, Inc.
 Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 2273/266-3245
 alpha.ph

SERVICE ORDER



Priority No.	0037
SO No.	462961
S.O Date	05/21/2024
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 100495
PATIENT NAME : ENTRAMPAS, CHRISTIAN.
PATIENT ADDRESS : G. OUANO ST., WALING-WALING, Opao, Mandaue City, Cebu
MOBILE NO. : 09996666347
EMAIL ADDRESS : CHRISPAS96@GMAIL.COM
REQUESTING PHYSICIAN
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Male
BIRTHDATE : 03/12/1996
AGE : 28
CIVIL STATUS : Single
SC/PWD ID
HMO CARD NO.
PATIENT STATUS : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME *PE, CHEST PA, CBC, UA, SE W, DRUG TEST (NOTE: PLEASE COMPLY WITH THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1.00	800.00	800.00

SUMMARY OF CHARGES	
TOTAL SALES	800.00
VARIABLE SALES	0.00
V-A-T	0.00
SC/PWD DISCOUNT	0.00
AMOUNT DUE	800.00

PRIME CARE
LAB TESTS DONE
DATE: 5/21/24

PREPARED BY:

Maurice C. Escario

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

BY:

Date Created: 05/21/2024 10:12 AM

Republika ng Pilipinas
KAGAWARAN NG EDUKASYON
Rehiyon VII,

Sangay ng Siyudad ng Mandaue
Mandaue City Comprehensive National High School
Plaridel Street, Reclamation Area, Mandaue City


Pinatutunayan nito na si
This certifies that

CHRISTIAN ENTRAMPAS


na walang nakatapos ng kurso sa Sekundarya na itinakda para sa mataas na paaralan
satisfactorily completed the academic secondary course prescribe for the High School
ng Kalihim ng Edukasyon kaya pinagkalooban siya nitong
by the Secretary of Education and is therefore awarded this

 **Katibayan** 
Diploma
Diploma




Siyudad ng Mandaue
Given in Mandaue City
Pilipinas ngayong ika-30 ng Marso, 2012
Philippines this 30th day of March, 2012

REINA S. PEREZ
Principal IV


VIRGINIA C. ZAPANTA, Ed. D.
Schools Division Superintendent



Republic of the Philippines
SOCIAL SECURITY SYSTEM

SS NUMBER SLIP

06-4481549-9

ENTRAMPAS, CHRISTIAN

03/12/1996



Mobile view



Edit