



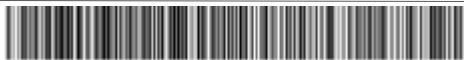
Republic of the Philippines
SOCIAL SECURITY SYSTEM

SS NUMBER SLIP

06-4598501-4

TUTOR, VINA MARIE SALAO

11/02/2000



06-4598501-4 TUTOR, VINA MARIE SALAO



MEMBER'S DATA FORM (MDF)

FOR REGISTERED EMPLOYEES ONLY	
Employee Name	12132044013
Employee ID	023215786790

EMPLOYMENT STATUS: UNEMPLOYED RETIRED OTHER

MEMBER'S POSITION

MEMBER'S DETAILS					
NAME	LAST NAME	FIRST NAME	HOME TELEPHONE	MOBILE PHONE	NO. OF CHILDREN
MEMBER	LIU	YI	908-888-8888	908-888-8888	<input type="checkbox"/>
FATHER	LIU	YI	908-888-8888	908-888-8888	<input type="checkbox"/>
MOTHER	LIU	YI	908-888-8888	908-888-8888	<input type="checkbox"/>
WIFE	LIU	YI	908-888-8888	908-888-8888	<input type="checkbox"/>
MEMBER'S HOME ADDRESS					<input type="checkbox"/>
MEMBER'S HOME ADDRESS					<input type="checkbox"/>

DATE OF BIRTH: 12/12/1980		MARRIAGE STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED		ISSUED & EXPIRES: 12/12/1980 - 12/12/2010	
TYPE OF BIRTH: <input type="checkbox"/> NATURAL <input type="checkbox"/> ADOPTED		EMPLOYMENT STATUS: <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME		EMPLOYEE ID: 12132044013	
EMPLOYEE NUMBER: 12132044013		EMPLOYEE NUMBER: 12132044013		EMPLOYEE NUMBER: 12132044013	
EMPLOYEE NUMBER: 12132044013		EMPLOYEE NUMBER: 12132044013		EMPLOYEE NUMBER: 12132044013	

ADDRESS AND CONTACT DETAILS

REGISTERED HOME ADDRESS				CURRENT HOME ADDRESS			
Address Line 1	Address Line 2	City	State	Zip	Phone	Area Code	Telephone Number
123 Main St	APT 101	New York	NY	10001	908	888	8888
City	State	Zip	Phone	Area Code	Telephone Number		
New York	NY	10001	908	888	8888		
City	State	Zip	Phone	Area Code	Telephone Number		
New York	NY	10001	908	888	8888		

REGISTERED HOME ADDRESS				CURRENT HOME ADDRESS			
Address Line 1	Address Line 2	City	State	Zip	Phone	Area Code	Telephone Number
123 Main St	APT 101	New York	NY	10001	908	888	8888
City	State	Zip	Phone	Area Code	Telephone Number		
New York	NY	10001	908	888	8888		
City	State	Zip	Phone	Area Code	Telephone Number		
New York	NY	10001	908	888	8888		

THIS FORM MAY BE REPRODUCED, NOT FOR SALE.



Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

Corporate Action Center Hotline - (02) 441-7442

www.philhealth.gov.ph



MEMBER DATA RECORD

MEMBER BASIC INFORMATION

PhilHealth Identification Number (PIN) : **12-250291782-8** PhilSys Number :
Member Category : DIRECT CONTRIBUTOR - SELF
Sub-Category : EARNING INDIVIDUAL - INDIVIDUAL NHTS Coverage Validity Period : N/A
: N/A - N/A

TUTOR, VINA MARIE SALAO

POBLACION II, MABINI BOHOL

Foreign Address : N/A Sex : FEMALE
Date of Birth : 11/02/2000
Place of Birth : MABINI, BOHOL
Contact No. (Foreign) : N/A Civil Status : SINGLE
(Local) : +639262613954 Tax Identification Number :

ENTITY INFORMATION

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

DEPENDENT INFORMATION

PIN	Surname	Given Name	Middle Name	Sex	Relation	Date of Birth
N/A						

*** 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.

Aug 16, 2023 10:40 AM



REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation



PhilHealth
Philippine Health Insurance Corporation



12-250291782-8

TUTOR, VINA MARIE SALAO

NOVEMBER 02, 2000 - FEMALE

POBLACION II MABINI, BOHOL - 6013



1 2 2 5 0 2 9 1 7 8 2 8

CERTIFICATION

The person whose name and signature appear on this card is a beneficiary of the National Health Insurance Program. He/She, including his/her qualified dependents, are entitled to the benefits and privileges of the Program by virtue of Republic Act No. 7875, as amended.

ATTY. DANTE A. GIERRAN, CPA
President and Chief Executive Officer (CEO)



BUREAU OF INTERNAL REVENUE
REVENUE REGION 13
REVENUE DISTRICT NO. 084
TAGBILARAN CITY, BOHOL
TIN VERIFICATION SLIP

TIN: _____

NO TIN

LAST NAME: _____

TUTOR

FIRST NAME: _____

VINA MARIE

MIDDLE NAME: _____

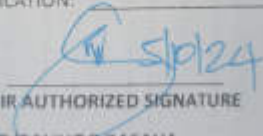
SALAO

DATE OF BIRTH: _____

NOVEMBER 2, 2000

RDO: _____

TAXPAYER CLASSIFICATION: _____


BIR AUTHORIZED SIGNATURE

NOTE: PLEASE READ/PALIHOG BASAHA

Please present **BIRTH CERTIFICATE** or **ID** or any Document
showing your **NAME** and **BIRTHDATE**

Republic of the Philippines
Department of Justice
National Bureau of Investigation

39385262

Application No. T380VRES0-WL1202129

TUTOR

SALAO

PURON ADELFA SITO BINGGODY BRGY BUMBONG TALISAY CITY CEBU

November 02, 2000

FLPHNO

MULTI-PURPOSE CLEARANCE

NO DEROGATORY RECORD

Issue Date
June 04, 2021

VINA MARE

PERSONAL COPY

MADRA BONGOL

November 02, 2000

SINGLE



PERSONAL COPY

SEX
FEMALE



Clearance Issued by: [Signature]

Agency	DOJ	Office	Manila
Unit	Administrative	Section	Administrative
Officer	[Signature]	Rank	Inspector 4
Officer ID	00000000-00000000	Unit	0000
Officer No.	00000000-00000000	Unit	0000



T380VRES0-WL1202129

PTT: MARIANO G. DE LEON
Director

Republic of the Philippines
Department of Justice
National Bureau of Investigation

39385262

Application No. T380VRES0-WL1202129

TUTOR

SALAO

PURON ADELFA SITO BINGGODY BRGY BUMBONG TALISAY CITY CEBU

November 02, 2000

FLPHNO

MULTI-PURPOSE CLEARANCE

NO DEROGATORY RECORD

Issue Date
June 04, 2021

VINA MARE

PERSONAL COPY

MADRA BONGOL

November 02, 2000

SINGLE



PERSONAL COPY

SEX
FEMALE



Clearance Issued by: [Signature]

Agency	DOJ	Office	Manila
Unit	Administrative	Section	Administrative
Officer	[Signature]	Rank	Inspector 4
Officer ID	00000000-00000000	Unit	0000
Officer No.	00000000-00000000	Unit	0000



T380VRES0-WL1202129

PTT: MARIANO G. DE LEON
Director

Multiple Birth Form No. 102
(Revised January 1988)

(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 blue-ink.
Place X before the appropriate answer in Items 2, 3a, 3b, and 10a.

Province Isabel Registry No. 280-123
City/Municipality Robinet 010

1. NAME First Middle Last
YVES MARIE SALAS YVINE
2. SEX 1 Male 2 Female
3. DATE OF BIRTH Day Month Year
02 November 2000

For OCR USE ONLY:
Population Reference No.
123-ABD 1201-C

4. PLACE OF BIRTH (Name of Hospital, Clinic, Institution) (City/Municipality) (Province)
Alone Robinet Isabel

TO BE FILLED UP AT THE
OFFICE OF THE CIVIL
REGISTRAR

5a. TYPE OF BIRTH 1 Single 2 Twin 3 Triplet, etc.
b. IF MULTIPLE BIRTH, CHILD WAS
1 First 2 Second
c. BIRTH ORDER (How borne and total deaths including this delivery) (First, second, third, etc.)
First First same
d. WEIGHT AT BIRTH 3700 grams

#1
800000037

6. MOTHER'S NAME First Middle Last
ANNEKA OLAF SALAS

#2
2 02/11/00

7. CITIZENSHIP 1 Filipino 2 Alien
8. RELIGION Roman Catholic

#3
723110

9a. Total number of children born alive 01
b. No. of children with living including this birth 01
c. No. of children born alive but are now dead 00

#4
1

10. OCCUPATION Teacher
11. Age at the time of this birth 30 years

#5
01 23/32

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)
Alone Robinet Isabel

#6
1 1

13. NAME First Middle Last
YVES ROSE YVINE

14. CITIZENSHIP 1 Filipino 2 Alien
15. RELIGION Roman Catholic

16. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, acceptable Affidavit of Acknowledgment, Administration of Estate of the Mother)
24 April 1998 - Santa Monica Parish Church, Robinet, Isabel

16a. ATTENDANT 1 Physician 2 Nurse 3 Midwife
4 Other (Traditional Healer) 5 Other (Specify)

#7
01 01 00

#8
734 32

16b. CERTIFICATION OF BIRTH (How many certify that I attended the birth of the child who was born alive) 2 3 or more
Signatures Yves Marie Salas Address Robinet II, Robinet, Isabel
Name in Print YVES M. SALAS City/Municipality Robinet
Date of Position 02 November 2000 Date 02 November 2000

#9
723110

17. INFORMANT
Signature Yves Marie Salas Address Alone, Robinet, Isabel
Name in Print YVES M. SALAS
Relationship to Child Father Date 02 November 2000

#10
924 32

18. PREPARED BY
Signature RITA A. MARIANO Address Robinet, Isabel
Name in Print RITA A. MARIANO City/Municipality Robinet
Date of Position 02 November 2000 Date 02 November 2000

#11
4-24-98
12310

19. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR
Signature MAVILA B. MORALES
Name in Print MAVILA B. MORALES
Title or Position Asst. Civil Registrar
Date 02 November 2000

#12
1

DB312-GA-400RYV-01253-B1001

BRen

01231-800X201-3

Documentary

Stamp Tax Paid

CLARE DENNIS S. MAPA, Ph.D.
National Statistician and Civil Registrar General
Philippine Statistics Authority



1488888128800125310140222001



OFFICE OF THE PUNONG BARANGAY


CERTIFICATION

To Whom It May Concern:

This is to certify that Mr. / Mrs. / Ms. Vina Marie Salas Tutor
25 yrs old whose signature and thumbmark appear below, is residing at
Sane-4 Tutor Adelfa, Sitio Wincor, Barangay Dumlog, City of
Talisay, Cebu since year 2017, until present.

This certification is being issued upon the request of
Vina Marie Salas Tutor in connection with his/her application for
local employment or for whatever legal purpose this may
serve him/her best.

Issued this 17th day of June, 2024.


Hon. Nelson A. Abellana
Punong Barangay


Signature of applicant



Off. No. _____

Off. No. _____

Issued at _____

Issued on _____



OFFICIAL TRANSCRIPT OF RECORDS

Page 1 of 4

Student Name : TUTOR, VINA MARIE SALAD

Subject Title & No.	Description	Grade	Unit
Cebu Normal University, Cebu City			
<u>First Semester 2022-2023</u>			
BACHELOR OF SECONDARY EDUCATION MAJOR IN SOCIAL STUDIES (BSED-60CSTED)			
Edus 14	Trends and Issues in Education	1.00	3.0
GE 10	Practical Filipino	1.00	3.0
GE 11	The Life and Works of Rizal	1.20	3.0
GE 12	Science and Technology and Society	1.20	3.0
GE 7	Readings in Philippine History	1.30	3.0
GE 8	Contemporary World	1.10	3.0
GE 9	Arts Appreciation	1.30	3.0
SSM 24	Research in Social Studies	2.00	3.0

Second Semester 2022-2023

BACHELOR OF SECONDARY EDUCATION MAJOR IN SOCIAL STUDIES (BSED-60CSTED)			
Edus 15	Teaching Internship	1.00	6.0

Weighted Average : 1.487

GRADUATED MAGNA CUM LAUDE

**BACHELOR OF SECONDARY EDUCATION
MAJOR IN SOCIAL STUDIES
JUNE 06, 2023**

Exempted from Special Order, as Mandated by
P.D. 844 and Republic Act No. 8488

→ ENTRIES BELOW THIS LINE ARE CONSIDERED NULL AND VOID →

Remark : FOR USE IN EMPLOYMENT ONLY

NOTE : This transcript is original if it bears the embossed seal of the university and the ink signature of the Registrar.

NOT VALID WITHOUT
SEAL

DR No. 391413

Dated 07-05-2023

and Academic Registrar: 07-05-2023 09:07:00am

JASON P. SARIQUIL, LPT
University Registrar III &



Vina Marie S. Tutor

Sketch of Residence from Discolandia, Burgos St., Basing, Talisay City, Cebu to Silo Adelle, Silo Miggory, Dumlog, Talisay City, Cebu.



Vina Marie S. Tutor

Sketch of Residence from Crocolandia, Burgos St., Biasang, Talisay City, Cebu to Sibio Adelfa, Sibio Minggoy, Dumlog, Talisay City, Cebu.



REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation



PhilHealth



12-250291782-8

TUTOR, VINA MARIE SALAO

NOVEMBER 02, 2000 - FEMALE

POBLACION II MABINI, BOHOL - 6013

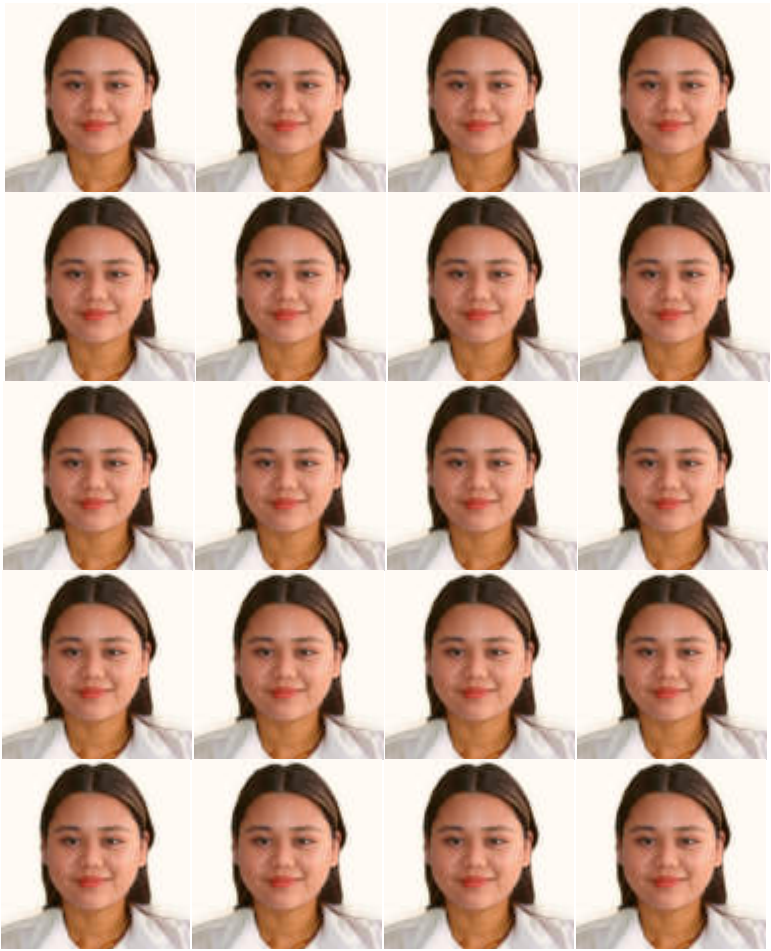


1 2 2 5 0 2 9 1 7 8 2 8

CERTIFICATION

The person whose name and signature appear on this card is a beneficiary of the National Health Insurance Program. He/She, including his/her qualified dependents, are entitled to the benefits and privileges of the Program by virtue of Republic Act No. 7875, as amended.

ATTY. DANTE A. GIERRAN, CPA
President and Chief Executive Officer (CEO)



Online Registration and Update System

YOUR APPLICATION IS ACCEPTED.

Hi Vina Marie Salao Tutor,

Your Application for registration has been accepted with Taxpayer Identification Number (TIN) 652-325-660.