



# MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Funds USE ONLY	
Pag-IBIG MD NUMBER	121201214446
REGISTRATION TRACKING NUMBER	917153917466

OCCUPATIONAL STATUS	EMPLOYED				
MEMBERSHIP CATEGORY	EMPLOYED - PRIVATE				
	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO. MIDDLE NAME
MEMBER	ROMERO	MARY CAMILLE		DIAGUIAL	<input type="checkbox"/>
FATHER	ROMERO	JAMES		SILVANA	<input type="checkbox"/>
MOTHER (Maiden Name)	PACQUIAL	CAROLINA		BACONL	<input type="checkbox"/>
SPOUSE (if Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	ROMERO	MARY CAMILLE		PACQUIAL	<input type="checkbox"/>
DATE OF BIRTH	MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)		
10/01/1980	MARRIED		SEC NUMBER		121201214446
PLACE OF BIRTH	CITIZENSHIP		SSS NUMBER		
CLAYTON SURGADO DEL NORTE	FILIPINO				
SEX	HEIGHT (cm)	WEIGHT (kg)	PROMINENT DISTINGUISHING FACIAL FEATURES		EMPLOYEE NUMBER
FEMALE	140.00	45.00	FAIR COMPLEXION		
COMMON REFERENCE NUMBER (CRN)	FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		For AFP/PPNP Employee, Serial/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.	Street Name	CELL PHONE	
Subdivision			Barangay	BUSINESS (DIRECT LINE)	
Municipality/City			Province/State/Country	BUSINESS (TRUNK LINE)	
CLAYTON			SURIGAO DEL NORTE, PHILIPPINES	E-MAIL ADDRESS	
ZIP Code				rockandroll@gmail.com	
5410					
PRESENT HOME ADDRESS					
Unit/Room No. - Floor		Building Name	Lot no.	Block no.	Phase No.
					CRN
Municipality/City		Province/State/Country	Zip Code		
MANILA		PHILIPPINES	1009		
PREFERRED MAILING ADDRESS					
PRESENT HOME ADDRESS					

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.

# Pag-ibig



**MEMBER DATA RECORD**

**MEMBER INFORMATION**

PhilHealth Identification Number (PIN) : **182506442355**  
 Member Category : FORMAL ECONOMY NHTS Coverage :  
 Sub-Category : PRIVATE Effectivity Period :

**ROMERO, MARY CAMILLE BACQUIAL**  
 LADGARON (POB.), CLAVER, SURIGAO  
 DEL NORTE 8410

Foreign Address : N/A Sex : Female  
 Date of Birth : 10/25/1999  
 Place of Birth :  
 Contact No. (Foreign) : N/A Civil Status : SINGLE  
 (Local) : Tax Identification Number :

**EMPLOYER/ORGANIZED GROUP INFORMATION**

Philhealth Number (PEN/POGN) : 012000022312  
 Name of Employer/Organized Group : VCUSTOMER PHILIPPINES (CEBU) INC  
 Business Address : 90 GENERAL MAXILOM AVE, CAMPUHAW (POB.), CEBU CITY, CEBU  
 Telephone Number : 032 5126275  
 Tax Identification Number : 007964541000

**DEPENDENT INFORMATION**

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

\*\*\* NOTHING FOLLOWS \*\*\*

**LOURDES F. DIOCSON**  
 Regional Vice President  
 PRO - VII Cebu City

**Philhealth**

**Paalala :** Basahin ang nilalaman ng MDR. Kung may kulang o mali, ibalik agad upang maidagdag o 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 the MDR and do not hand it over to anybody. Provide photocopy to hospital in case of confinement and availment of benefits.)

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



### Employee Static Information (RRCS)

C.R.N.

SS Number **34-6684553-4**

Date of Birth **10-25-1999**

Member Name **ROMERO, MARY CAMILLE BACQUIAL**

Date of Coverage **03-2017**

(Surname, First Name Extension Middle Name)

### Address & Contact Information



LOG MEMBER INITIAL VISIT

## MEMBER DETAILS

E-1 Flag Status :	APPLICATION THRU THE WTS WITH PERSONAL REPLACEMENT AND SUBMITTED DOCUMENTS
Sex :	ITWALY
Reporting Date :	05-25-2007
Reporting ID :	01-0711794-1
Latest ER ID :	03-0282750-1
Latest ER Name :	RLW (LIMITED COLORS DISTRIBUTION
Claim Flag Status :	NO CLAIM
AS Number Status :	AS NUMBER ACTIVE
Transferred to (New SS Number) :	COVERED EMPLOYED
Coverage Status :	NO STATUS CHANGE
Change in Coverage Status :	
Date of Last Qualification :	
SS Number Withdrawal Reason :	OUT OF CITY
Record Location :	* MEMBER NOT YET ENROLLED IN THIS RECORD
SSS HR Enrollment Information :	



SSS HR Enrollment System  
Call Center Support  
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# TIN



BUREAU OF INTERNAL REVENUE  
RDO # 082 CEBU CITY - SOUTH

## TIN VERIFICATION QUERY RESULTS

TIN NO. 7477-693-295-000

LAST NAME: Romero

FIRST NAME: Mary Camille

MIDDLE NAME: Bacquial

ADDRESS: sambag 1 urgello cebu city

BIRTHDAY: Oct 25 1990

TAXPAYER CLASSIFICATION: LOCAL EMPLOYEE

RDO CODE: 081

VERIFIED BY: \_\_\_\_\_

~~XXXXXXXXXX~~  
05 SEP 2022

~~XXXXXXXXXX~~  
05 SEP 2022