



Concentrix Daksh Services Philippines Corporation
Ground Floor to 4th Floor, Building F, UP Ayala Technohub
Commonwealth Avenue, Diliman
Quezon City 1101
84238700 loc 351092
hr.autoresponse@concentrix.com

CERTIFICATE OF EMPLOYMENT

This is to certify that Ms. ALEXA GABRIELLE VERIL CAMINGAO was an employee of Concentrix Daksh Services Philippines Corporation. Ms. CAMINGAO was employed as Advisor I, Customer Service under Operations from August 31, 2021 up to February 08, 2023.

Ms. CAMINGAO is cleared from any accountability from the company.

This certification is being issued upon the request of Ms. CAMINGAO for whatever legal purpose it may serve

Should you have a clarification on the foregoing, you may contact 84238700 loc 351092.

Issued on March 03, 2023.

This document is a system generated printout and does not require a signature

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CONCENTRIX CORPORATION



BIR Form No.

2316

January 2018 (ENC5)

Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



2316 01/18ENC5

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

Main form body containing sections: Part I - Employee Information, Part II - Employer Information (Present), Part III - Employer Information (Previous), Part IV - Summary, and Part IV-B Details of Compensation Income & Tax Withheld from Present Employer.

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.

Signature section with fields for Present Employer/Authorized Agent Signature (51), Employee Signature (52), and Date/Place of Issue.

To be accomplished under substituted filing

Substituted filing section with fields for Present Employer/Authorized Agent Signature (53) and Employee Signature (54).

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



Republic of the Philippines
Department of Justice
National Bureau of Investigation



31482479

This is to certify that the person whose name, address, age, sex and date of birth are appearing below is qualified to hold a passport and for purposes of his travel.

NR ID NO
C652EANE10-ML16137451
FIRST NAME
CAMINGAO
MIDDLE NAME
VERIL
ADDRESS
BLK 7 QUARRY ROAD SEWAGE PUSOK LAPU LAPU CITY CEBU
DATE OF BIRTH
May 14, 2001
CITIZENSHIP
FILIPINO

VALID UNTIL
July 03, 2025
FIRST NAME
ALEXA GABRIELLE
HUSBAND'S SURNAME
BADIAN CEBU
LIVE STATUS
SINGLE



GENDER
FEMALE

PURPOSE
MULTI-PURPOSE CLEARANCE

PERSONAL COPY

REMARKS
NO RECORD ON FILE



C652EANE10-ML16137451

JUDGE JAIME B. SANTIAGO (RET.)
Director

Date Printed: 07/03/2024 04:18 PM
Agency: NL 18
CASID: rtszery
O.P. No: MPTAG/JGHEA
O.P. Date: 27/06/2024 4:18:12 PM
DST PWD
DATRO: rtszery
BICID: rtszery
RSCID
RHSID
PRTR: rtszery



University of San Jose-Recoletos

Cor. Magallanes and P. Lopez Sts.
Cebu City

STATEMENT OF ACCOUNTS

2nd Semester 2023-2024

July 8, 2024

Student No: 201902225-1	Name: CAMINGAO (Last Name)	ALEXA GABRIELLE (First Name)	VERIL (Middle Name)
Program: BA Journ		Year Level: 2	

TUITION AND OTHER CHARGES

TUITION & LABORATORY FEE		20,322.96
TUITION	20,322.96	
MISCELLANEOUS AND OTHER FEES		8,479.75
ATHLETICS (GAD FEE, ESPORTS & ADMIN)	530.00	
COMPUTER FEE (MIS)	200.00	
CULTURAL FEE	200.00	
ENERGY FEE/UNIT	2,698.50	
GUIDANCE & COUNSELLING	415.00	
IMC FEE	800.00	
INSURANCE	60.00	
LEARNING MANAGEMENT SYSTEM	656.25	
LIBRARY FEE	1,000.00	
MEDICAL-DENTAL	270.00	
ONLINE MATRICULATION & REG.	430.00	
PAASCU / CEAP	30.00	
PRISAA FEE	100.00	
PUBLICATION	100.00	
REAP	100.00	
RESEARCH FEE	300.00	
SSC FEE	50.00	
STUDENT ACTIVITY FEE	215.00	
WIFI FEE	325.00	
ETC FEES		273.50
ALUMNI FEE	200.00	
EXAMINATION BOOK	73.50	
TOTAL		29,076.21

NOT VALID
WITHOUT
OFFICIAL SEAL


(SGD) REV. FR. LEOPOLDO V. ESTIOKO, OAR
vp - Business and Finance

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE: *OK*
LEFT EYE: *OK*

Optics & Diagnostic Center, Inc.
Entrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
0273/266-3245
pha.ph

SERVICE ORDER



Priority No.	0080
SO No.	467412
S.O Date	07/08/2024
Terms	30 Days
Amount Due	P800.00

PRIME CARE SOLUTIONS
CEBU CITY, CEBU PHILIPPINES 6000, Cebu City (Capital), Cebu

PATIENT INFORMATION

PATIENT ID : 102503
PATIENT NAME : CAMINGAO, ALEXA GABRIELLE, VERIL
PATIENT ADDRESS : Pusok, Lapu-Lapu City (Opon), Cebu
MOBILE NO. : 0969 487 5686
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 05/14/2001
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
P120	IPLOY PEME	1.00	800.00	800.00	TOTAL SALES 800.00
	CHEST PA				VATABLE SALES 0.00
	CBC				V-A-T 0.00
	UA				SC/PWD DISCOUNT 0.00
	DRUG TEST				AMOUNT DUE 800.00

Armenion

PRIME CARE
JUNE 06, 2024

Big Dpw 7/8/24

THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)

PREPARED BY:

Arissa Marie L. Armenion

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

BY: *[Signature]*
Signature Over Printed Name

Date Created: 07/08/2024 01:16 PM

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.

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



(Copy for CCRG)

Municipal Form No. 102 (Revised January 1993)		(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 19a.)					
Province <u>Cebu</u>			Registry No. <u>2001-439</u>		
City/Municipality <u>Badian</u>					
CHILD	1. NAME (First) <u>ALEXA GABRIELLE</u> (Middle) <u>VERIL</u> (Last) <u>CAMINGAO</u>		For DOCS USE ONLY: Population State Case No.		
	2. SEX <u>1</u> Male <u>X</u> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>14</u> <u>May</u> <u>2001</u>		TO BE FILLED UP AT THE REGISTRY OFFICE
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>Tubod</u> <u>Badian</u> <u>Cebu</u>		5a. TYPE OF BIRTH <u>X</u> 1 Single <u>2</u> Twin <u>3</u> Triplet, etc.		
	5b. IF MULTIPLE BIRTH, CHILD WAS <u>1</u> First <u>2</u> Second <u>3</u> Others, Specify		b. IF MULTIPLE BIRTH, CHILD WAS		
c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>first</u>		d. WEIGHT AT BIRTH <u>2268</u> grams		61 <u>1404201</u>	
MOTHER	6. MAIDEN NAME (First) <u>Analie</u> (Middle) <u>Apostol</u> (Last) <u>Veril</u>		7. CITIZENSHIP <u>Filipino</u>		
	8. RELIGION <u>Roman Catholic</u>		9a. Total number of children born alive: <u>2</u>		
	9b. No. of children still living including this birth: <u>1</u>		9c. No. of children born alive but are now dead: <u>0</u>		
	10. OCCUPATION <u>housekeeper</u>		11. Age at the time of this birth: <u>22</u> years		
12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Tubod</u> <u>Badian</u> <u>Cebu</u>		13. NAME (First) <u>Emelio</u> (Middle) <u>Alcoseba</u> (Last) <u>Camingao</u>			
14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>			
16. OCCUPATION <u>glass installer</u>		17. Age at the time of this birth: <u>21</u> years			
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back) <u>February 2, 2001 - Lapu-lapu City</u>					
19a. ATTENDANT <u>3</u> Physician <u>2</u> Nurse <u>X</u> 3 Midwife <u>4</u> Hilot (Traditional Midwife) <u>5</u> Others (Specify)					
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>2:00</u> <u>AM</u> o'clock am/pm on the date stated above.					
Signature <u>WILFRADO M. DIOSANA</u> Name in Print <u>RHM</u> Title or Position		Address <u>Poblacion, Badian, Cebu</u> Date <u>May 25, 2001</u>			
20. INFORMANT Signature <u>ANALIE V. CAMINGAO</u> Name in Print <u>Mother</u> Relationship to the child Date <u>MAY 25, 2001</u>					
21. PREPARED BY Signature <u>NICASTA B. SABANAL</u> Name in Print <u>MOR</u> Title or Position Date <u>May 25, 2001</u>			22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>NICASTA B. SABANAL</u> Name in Print <u>MOR</u> Title or Position Date <u>May 25, 2001</u>		

61 1404201
 62 1
 63 22079
 64 1
 65 012268
 66 1 1
 67 01 01 00
 68 2-0 -
 69 22079
 70 1 1
 71 X-20 21
 72 218
 73 1

03819-BB-400JVD-00140-BI037

BEST POSSIBLE IMAGE



T400038194000014006162010037

GG600107102

BRen
02207-B01KE01-7

Documentary
Stamp Tax Paid

CARMELITA N. ERICTA
 Administrator and Civil Registrar General
 National Statistics Office



One Montage, 2nd Floor, Unit 01-03 Archbis...
Quarry Rd, Lapu-Lapu City, Cebu

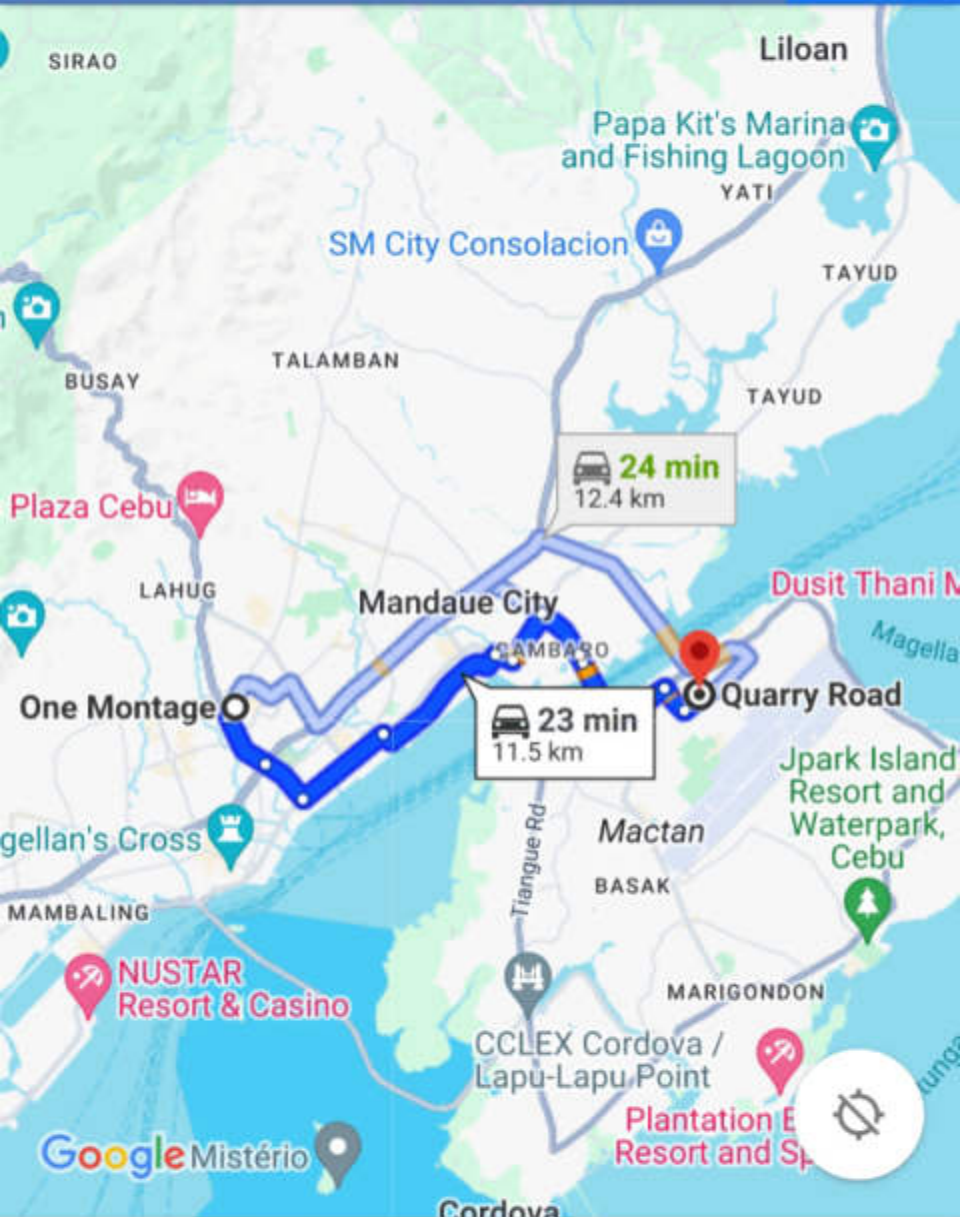


23 min

20 min

1 hr 26

2 hr 17



23 min (11.5 km)

Via F.E. Zuellig Avenue

Navigate in app

Steps

Preview