

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

Province **METRO MANILA** Registry No. **2015 5195**  
City/Municipality **MANDALUYONG**

**CHILD**  
1. NAME (First) **ZANE LOUIE** (Middle) **LOPEZ** (Last) **PALCO**  
2. SEX (Male / Female) **MALE** 3. DATE OF BIRTH (Day) **20** (Month) **SEPTEMBER** (Year) **2015**  
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay) **MANDALUYONG CITY MEDICAL CENTER - ANNEX, MANDALUYONG CITY**  
5a. TYPE OF BIRTH (Single, Twin, etc.) **Single** 5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) **N/A** 5c. BIRTH ORDER (Order of the birth to previous live births including fetal death) (First, Second, Third, etc.) **First** 5. WEIGHT AT BIRTH **3200** grams

**MOTHER**  
7. MOTHER'S NAME (First) **JINKY** (Middle) **COLLADO** (Last) **LOPEZ**  
8. CITIZENSHIP **FILIPINO** 9. RELIGION/RELIGIOUS SECT **ROMAN CATHOLIC**  
10a. Total number of children born alive **1** 10b. No. of children still living including this birth **1** 10c. No. of children born alive but are now dead **0** 11. OCCUPATION **HOUSEKEEPER** 12. AGE at the time of this birth (completed years) **23**  
13. RESIDENCE (House No., St., Barangay) **BLK 24 MARTINEZ ST., BRGY. ADDITION HILLS MANDALUYONG CITY** (City/Municipality) **MANDALUYONG** (Province) **23** (Country)

**FATHER**  
14. NAME (First) **REYBOY** (Middle) **GALINATO** (Last) **PALCO**  
15. CITIZENSHIP **FILIPINO** 16. REGION/RELIGIOUS SECT **ROMAN CATHOLIC** 17. OCCUPATION **CUSTOMER SERVICE REP** 18. AGE at the time of this birth (completed years) **24**  
19. RESIDENCE (House No., St., Barangay) **BLK 24 MARTINEZ ST., BRGY. ADDITION HILLS MANDALUYONG CITY** (City/Municipality) **MANDALUYONG** (Province) **24** (Country)

MARRIAGE OF PARENTS (If not married, according to Affidavit of Acknowledgment of Paternity at the back.)  
20a. DATE (Month) (Day) (Year) **NOT MARRIED** 20b. PLACE (City/Municipality) (Province) (Country) **N/A**

21a. ATTENDANT  
 1. Physician  2. Nurse  3. Midwife  4. Hilot (Traditional Birth Attendant)  5. Others (Specify)

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, Hilot)  
I hereby certify that I attended the birth of the child who was born alive at **11:45** am/pm on the date of birth specified above.  
Signature \_\_\_\_\_ Address **MANDALUYONG CITY MEDICAL CENTER-ANNEX, MAND. CITY**  
Name in Print **JENIFER FELIZE-SOSA, MD**  
Title or Position **ATTENDING PHYSICIAN** Date \_\_\_\_\_

22. CERTIFICATION OF INFORMANT  
I hereby certify that all information supplied are true and correct to my own knowledge and belief.  
Signature \_\_\_\_\_  
Name in Print **REYBOY G. PALCO**  
Relationship to the Child **FATHER**  
Address **BLK 24 MARTINEZ ST., BRGY. ADD. HILLS M.C.**  
Date **21-Sep-15**  
23. PREPARED BY  
Signature \_\_\_\_\_  
Name in Print **VITA MAY L. GUAD**  
Title or Position **CLERK**  
Date **21-Sep-15**

24. RECEIVED BY  
Signature \_\_\_\_\_  
Name in Print **FEL ANCHETA**  
Title or Position **Administrative Assistant II**  
Date **OCT 14 2015**  
25. REGISTERED BY THE CIVIL REGISTRAR  
Signature \_\_\_\_\_  
Name in Print **POTENCIANA B. GARDUQUE**  
Title or Position **Asst. City Civil Registrar**  
Date **OCT 14 2015**

REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)

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

Province METRO MANILA	Registry No. 20174192
City/Municipality MANDALUYONG	

CHILD	1. NAME (First) (Middle) (Last) ZOEY LORRANE LOPEZ PALCO
	2. SEX (Male/Female) FEMALE
	3. DATE OF BIRTH (Day) (Month) (Year) 21 AUGUST 2017
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution) (City/Municipality) (Province) MANDALUYONG CITY MEDICAL CENTER ANNEX - MANDALUYONG CITY
MOTHER	5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) Single
	5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) NA
	5c. BIRTH ORDER (Order of the birth by previous live birth including twin birth) (First, Second, etc.) Second
	6. WEIGHT AT BIRTH 3400 grams

MOTHER	7. MAIDEN NAME (First) (Middle) (Last) JINKY COLLADO LOPEZ
	8. CITIZENSHIP FILIPINO
	9. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
	10a. Total number of children born alive 2
	10b. No. of children still living including this birth 2
	10c. No. of children born alive but are now dead 0
	11. OCCUPATION HOUSEKEEPER
	12. AGE at the time of this birth (Completed years) 25
	13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) BLK 24 MARTINEZ ST., WELFAREVILLE COMP. ADDITION HILLS MAND CITY

FATHER	14. NAME (First) (Middle) (Last) REYBOY GALINATO PALCO
	15. CITIZENSHIP FILIPINO
	16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
	17. OCCUPATION C.S.R.
	18. AGE at the time of this birth (Completed years) 26
	19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country) BLK 24 MARTINEZ ST., WELFAREVILLE COMP. ADDITION HILLS MAND CITY

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgement/Admission of Paternity at the back.)

20a. DATE (Month) (Day) (Year) NOT MARRIED	20b. PLACE (City/Municipality) (Province) (Country) NA
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21a. ATTENDANT

Physician  Nurse  Midwife  Hilot (Traditional Birth Attendant)  5 Others (Specify)

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Hilot Attendant/Hilot, etc.)  
I hereby certify that I attended the birth of the child who was born alive at \_\_\_\_\_ am/pm on the date of birth specified above.

Signature JONALD F. VENTURA, MD.	Address MANDALUYONG CITY MEDICAL CENTER - ANNEX
Name in Print ATTENDING PHYSICIAN	Date 21-Aug-17

22. CERTIFICATION OF INFORMANT I hereby certify that all information supplied are true and correct to my own knowledge and belief.	23. PREPARED BY
Signature REYBOY G. PALCO	Signature VITA MAY L. GUARD
Name in Print FATHER	Name in Print CLERK
Relationship to the Child BLK 24 MARTINEZ ST., WELF COMP ADD HILLS M.C.	Title or Position
Address	Date 23-Aug-17
Date 23-Aug-17	

24. RECEIVED BY Signature FEL. ANCHETA Name in Print Administrative Assistant V Title or Position Date SEP 20 2017	25. REGISTERED BY THE CIVIL REGISTRAR Signature JEFFREY A. ZULUETA Name in Print CITY CIVIL REGISTRAR Title or Position Date SEP 20 2017
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REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)



Republic of the Philippines  
Department of Justice  
National Bureau of Investigation



40006766

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  
**P420CREY19-ML1673756**

FAMILY NAME  
**PALCO**

MIDDLE NAME  
**GALINATO**

ADDRESS  
**V B CABAUG ST OPAO MANDAUE CITY CEBU**

DATE OF BIRTH  
**March 05, 1991**

CITIZENSHIP  
**FILIPINO**

PURPOSE  
**MULTI-PURPOSE CLEARANCE**

REMARKS  
**NO RECORD ON FILE**

VALID UNTIL  
**May 30, 2025**

FIRST NAME  
**REYBOY**

HUSBAND'S SURNAME

PLACE OF BIRTH  
**TRINIDAD BOHOL**

CIVIL STATUS  
**SINGLE**

GENDER  
**MALE**



SIGNATURE

**PERSONAL COPY**



Date Printed: Thursday, May 30, 2024 09:18 AM

Agency ML 10

CASID otazanj

O.R. No. MP6FBMYR4Z

O.R. Date 05/30/2024 9:14:18 AM

DST PAID

DAVID otazanj

BIOID otazanj

RECID

N7ID

PRTID lantapamb



P420CREY19-ML1673756

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



Form No. 102 (Revised 1983)

REPUBLIC OF THE PHILIPPINES  
**CERTIFICATE OF LIVE BIRTH**  
 (Fill out completely, accurately and legibly in ink or type)

(To be accomplished in triplicate)

PROVINCE Bohol LOCAL CIVIL REGISTRY NO. 91-171  
 CITY/MUNICIPALITY Trinidad

1. NAME (First) (Middle) (Last)  
 2. SEX (Place 'X' on appropriate answer) Male DATE OF BIRTH (Day) (Month) (Year)  
1 Male 2 Female 01 03 1991

4. PLACE OF BIRTH (Place of hospital/institution; if not in hospital, give street/borangay) (City/Municipality) (Province)  
Poblaacion Trinidad Bohol

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) 5b. IF MULTIPLE BIRTH, CHILD WAS  
1 Single 2 Twin 3 Three or more 1 First 2 Second 3 Third, 4th, etc.

6. MAIDEN NAME (First) (Middle) (Last) 7. NATIONALITY  
Yermania Galinato Filipino

8. NAME (First) (Middle) (Last) 9. NATIONALITY  
Ricardo Palas Filipino

10. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment of the Facts)  
 Date August 25, 1985 Place Marilao

11. CERTIFICATE OF ATTENDANT AT BIRTH  
 I hereby certify that I attended the birth of the child who was born alive at 01 o'clock am/pm on the date stated above.  
 Signature [Signature] Address R.N.H. - Trinidad, Bohol  
 Name in print SUSANA TUNALADO Date March 5, 1991  
 Title or position Midwife

14. INFORMANT  
 Signature [Signature] Address R.N.H. - Trinidad, Bohol  
 Name in print SUSANA TUNALADO Date March 25, 1991  
 Relationship to child Mother

15a. PREPARED BY Signature [Signature]  
 Name in print CREDITO T. BALUNGA  
 Title or position Asst. Registration Officer  
 Date March 25, 1991

15b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR  
 Signature \_\_\_\_\_  
 Name in print \_\_\_\_\_  
 Title or position \_\_\_\_\_  
 Date \_\_\_\_\_

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT 16b. DATE WHEN INFORMATION WAS SUPPLIED 1991

(Fill out items 17 to 25 in the spaces/bases provided for)

PROVINCE (copy the above) Bohol  
 CITY/MUNICIPALITY Trinidad

17. Weight at Birth (In grams) 3400 (11-14)

18. Birth Order of Child Ex. first, second, etc. 2nd (15-17)

19a. Total Number of Children Born Alive 5 (17-19) b. How many children are now living including this birth? 5 (15-17) c. How many children were born alive but are now dead? 1 (17-19)

20. Usual Occupation HK (13-15)

21. Age at the time of this Birth 32 (18-19)

22. Usual Residence (Borngay) (City/Municipality) (Province)  
Poblaacion Trinidad Bohol (16-23)

23. Usual Occupation Private (23-25)

24. Age at the time of this Birth 33 (25-27)

25. Attendant at Birth (Place 'X' on appropriate answer) 1 Physician 2 Nurse X Midwife 4 Midol 5 Others (130)

Sex  Male  Female Date of Birth 01/03/91 Place of Birth TRINIDAD Mother's Nationality  Filipino  Other Child's Status  1  2

NAME First Middle Last  
AYAYAY CHACCA

Local Civil Registry Number 9100171

06895-HG-004ARS-00099-BI010

BReN  
 01244-A91E502-2

Lisa Grace S. Bersales  
 LISA GRACE S. BERSALES, Ph.D.  
 National Statistician and Civil Registrar  
 Philippine Statistics Authority

POSSIBLE IMAGE



895004000991172018010

16419





## PALCO, REYBOY GALINATO

SS Number: 34-1922929-1 | CRN Number: 0111-4320226-9

*i* Your password will expire on Sep 08, 2024 | Your last login was on Feb 15, 2024 8:15:52 AM thru the SSS Website

- [HOME](#)
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- [INQUIRY](#)
- [BENEFITS](#)
- [LOANS](#)
- [SERVICES](#)
- [PAYMENT REFERENCE NUMBER \(PRN\)](#)
- [LOGOUT](#)

### Member Details

#### *+* Address & Contact Information

SS Number Status :	0 - ACTIVE
Document Compliance :	DOCUMENTARY REQUIREMENT(S) SUBMITTED
Membership Status :	PERMANENT
Prior Registrant :	NO
Date of SS Number Issuance :	
Sex :	MALE
Reporting Date :	08-16-2013
Reporting ID :	03-0002800-9
Latest ER ID :	03-9265641-8
Latest ER Name :	TELETECH OFFSHORE INVESTMENTS
Claim Flag Status :	0 - NO FINAL/FUNERAL CLAIM
Transferred to (New SS Number) :	
Membership Type :	EMPLOYEE
Change in Coverage Status	NO STATUS CHANGE
Date of Loan Disqualification	
SS Number Withdrawal Reason	
Record Location	MAKATI-GIL PUYAT
TIN Number	

# Pag-IBIG | REGULAR SAVINGS

## **Pag-IBIG MID No.**

121092315587

## **Membership Category**

EMPLOYED - PRIVATE

## **Current Employer**

IBEX GLOBAL SOLUTIONS PHILIPPINES INC

## **Initial Remittance Date**

08/12/2013

## **Last Remittance Date**

05/11/2022

## **Total Employee Share**

PHP 8,800.00

## **Total Employer Share**

PHP 8,800.00



REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF FINANCE  
BUREAU OF INTERNAL REVENUE

**PALCO, REYBOY GALINATO**

**TIN: 437-522-636-000**

**306A M. LERMA STREET**

**BRGY. NEW ZUNIGA**

**MANDALUYONG CITY**

**BIRTH DATE: March 5, 1991**

**REG. DATE: June 21, 2013**



  
SIGNATURE

**May 5, 2021**  
**Date Issued**



**02-050995882-4**

**PALCO, REYBOY GALINATO**

MARCH 05, 1991 - MALE

306A M LERMA ST NEW ZANIGA MANDALUYONG CITY,  
SECOND DISTRICT - 1501



0 2 0 5 0 9 9 5 8 8 2 4

**FORMAL ECONOMY**

  
Signature



BIR Form No. <b>2316</b> September 2021 (ENCS)		<b>Certificate of Compensation Payment/Tax Withheld</b> For Compensation Payment With or Without Tax Withheld		BIR WEBSITE	
1 For the Year (YYYY) <b>2 0 2 4</b>		2 For the Period From (MM/YY) <b>0 1 0 1</b> To (MM/YY) <b>0 3 2 1</b>		Part IV-B Details of Compensation Income & Tax Withheld from Present Employer	
3 TIN <b>4 3 7 5 2 2 6 3 6</b>		4 Employer's Name, Full Name, Tax Name, Middle Name <b>Falco, Reyboy Galinato</b>		5 BDO Code <b>1 2 6</b>	
6 Registered Address		7 Date of Birth (MM/DD/YYYY) <b>0 3 0 5 1 9 9 1</b>		8 Contact Number	
8 Local Home Address <b>Brgy. 35, Palanca St.,</b>		9 Statutory Minimum Wage rate per day		10 Statutory Minimum Wage rate per month	
10 Home Address <b>Harold City</b>		11 Minimum Wage/Labor (MWE) without compensation to exempt from withholding tax and not subject to income tax		12 TIN <b>4 0 2 0 5 1 1 2 9 0 0 0</b>	
13 Employer's Name <b>TeleTech Offshore Investments, Inc. d/b/a TTEC Customer Care Mgt Phlis. Branch</b>		14 Registered Address <b>FLYOVER DR. HARBOUR DR. MOA Pasay City Metro Manila 1300</b>		15 TIN <b>1 3 0 0 0</b>	
16 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer		17 Employer's Name		18 Registered Address	
19 Gross Compensation Income from Present Employer (Sum of Items 29 and 30)		20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 21)		21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 32)	
22 Add: Taxable Compensation Income from Previous Employer, if applicable		23 Gross Taxable Compensation Income (Sum of Items 21 and 22)		24 Tax Due	
25 Amount of Taxes Withheld <b>25A Present Employer</b>		26 Total Amount of Taxes Withheld as adjusted (Sum of Items 24 and 25B)		27 1% Tax Credit (PDRA Act of 2008)	
28 Total Taxes Withheld (Sum of Items 24 and 27)		29 Basic Salary <b>29,247.33</b>		30 Representation	
31 Commission		32 Profit Sharing		33 Fees including Director's Fees	
34 Hazard Pay		35 Overtime Pay		36 Other Benefits	
37 13th Month Pay and Other Benefits (maximum of P30,000)		38 De Minimis Benefits <b>4,374.59</b>		39 SSS, GSIS, PHIC & PAG-IBIG Contributions and Unlaw Ded. (Employee share only)	
40 Hazard Pay (MWE)		41 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 31)		42 Total Taxable Compensation Income Regular (Sum of Items 32 to 35)	
43 Night Shift Differential (MWE)		44 Transportation <b>0.00</b>		45 Cost of Living Allowance (COLA) <b>0.00</b>	
46 Hazard Pay (MWE)		47 Fixed Housing Allowance		48 Other Benefits	
47 13th Month Pay and Other Benefits (maximum of P30,000) <b>2,655.74</b>		49 4A <b>CD. Incentives</b>		50 Total Taxable Compensation Income (Sum of Items 36 to 37)	
48 De Minimis Benefits <b>4,374.59</b>		51 Commission		52 Profit Sharing	
49 SSS, GSIS, PHIC & PAG-IBIG Contributions and Unlaw Ded. (Employee share only) <b>3,897.50</b>		53 Fees including Director's Fees		54 Taxable 13th Month Benefits <b>0.00</b>	
50 Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 31) <b>10,927.83</b>		55 Hazard Pay		56 Overtime Pay <b>5,441.61</b>	
51 Taxable Compensation Income Regular <b>29,247.33</b>		57 Other Benefits		58 4A <b>CD. Incentives</b>	
52 Basic Salary <b>29,247.33</b>		59 4B		60 Total Taxable Compensation Income (Sum of Items 53 to 57)	
53 Commission		61 Commission		62 Profit Sharing	
54 Transportation <b>0.00</b>		63 Fees including Director's Fees		64 Taxable 13th Month Benefits <b>0.00</b>	
55 Cost of Living Allowance (COLA) <b>0.00</b>		65 Hazard Pay		66 Overtime Pay <b>5,441.61</b>	
60 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		67 Other Benefits		68 4A <b>CD. Incentives</b>	
61 Commission		69 4B		70 Total Taxable Compensation Income (Sum of Items 53 to 57)	
62 Profit Sharing		71 Commission		72 Profit Sharing	
63 Fees including Director's Fees		73 Fees including Director's Fees		74 Taxable 13th Month Benefits <b>0.00</b>	
64 Taxable 13th Month Benefits <b>0.00</b>		75 Hazard Pay		76 Overtime Pay <b>5,441.61</b>	
65 Hazard Pay		77 Other Benefits		78 4A <b>CD. Incentives</b>	
66 Overtime Pay <b>5,441.61</b>		79 4B		80 Total Taxable Compensation Income (Sum of Items 53 to 57)	
67 Other Benefits		81 Commission		82 Profit Sharing	
68 4A <b>CD. Incentives</b>		83 Fees including Director's Fees		84 Taxable 13th Month Benefits <b>0.00</b>	
69 4B		85 Hazard Pay		86 Overtime Pay <b>5,441.61</b>	
70 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		87 Other Benefits		88 4A <b>CD. Incentives</b>	
71 Commission		89 4B		90 Total Taxable Compensation Income (Sum of Items 53 to 57)	
72 Profit Sharing		91 Commission		92 Profit Sharing	
73 Fees including Director's Fees		93 Fees including Director's Fees		94 Taxable 13th Month Benefits <b>0.00</b>	
74 Taxable 13th Month Benefits <b>0.00</b>		95 Hazard Pay		96 Overtime Pay <b>5,441.61</b>	
75 Hazard Pay		97 Other Benefits		98 4A <b>CD. Incentives</b>	
76 Overtime Pay <b>5,441.61</b>		99 4B		100 Total Taxable Compensation Income (Sum of Items 53 to 57)	
77 Other Benefits		101 Commission		102 Profit Sharing	
78 4A <b>CD. Incentives</b>		103 Fees including Director's Fees		104 Taxable 13th Month Benefits <b>0.00</b>	
79 4B		105 Hazard Pay		106 Overtime Pay <b>5,441.61</b>	
80 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		107 Other Benefits		108 4A <b>CD. Incentives</b>	
81 Commission		109 4B		110 Total Taxable Compensation Income (Sum of Items 53 to 57)	
82 Profit Sharing		111 Commission		112 Profit Sharing	
83 Fees including Director's Fees		113 Fees including Director's Fees		114 Taxable 13th Month Benefits <b>0.00</b>	
84 Taxable 13th Month Benefits <b>0.00</b>		115 Hazard Pay		116 Overtime Pay <b>5,441.61</b>	
85 Hazard Pay		117 Other Benefits		118 4A <b>CD. Incentives</b>	
86 Overtime Pay <b>5,441.61</b>		119 4B		120 Total Taxable Compensation Income (Sum of Items 53 to 57)	
87 Other Benefits		121 Commission		122 Profit Sharing	
88 4A <b>CD. Incentives</b>		123 Fees including Director's Fees		124 Taxable 13th Month Benefits <b>0.00</b>	
89 4B		125 Hazard Pay		126 Overtime Pay <b>5,441.61</b>	
90 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		127 Other Benefits		128 4A <b>CD. Incentives</b>	
91 Commission		129 4B		130 Total Taxable Compensation Income (Sum of Items 53 to 57)	
92 Profit Sharing		131 Commission		132 Profit Sharing	
93 Fees including Director's Fees		133 Fees including Director's Fees		134 Taxable 13th Month Benefits <b>0.00</b>	
94 Taxable 13th Month Benefits <b>0.00</b>		135 Hazard Pay		136 Overtime Pay <b>5,441.61</b>	
95 Hazard Pay		137 Other Benefits		138 4A <b>CD. Incentives</b>	
96 Overtime Pay <b>5,441.61</b>		139 4B		140 Total Taxable Compensation Income (Sum of Items 53 to 57)	
97 Other Benefits		141 Commission		142 Profit Sharing	
98 4A <b>CD. Incentives</b>		143 Fees including Director's Fees		144 Taxable 13th Month Benefits <b>0.00</b>	
99 4B		145 Hazard Pay		146 Overtime Pay <b>5,441.61</b>	
100 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		147 Other Benefits		148 4A <b>CD. Incentives</b>	
101 Commission		149 4B		150 Total Taxable Compensation Income (Sum of Items 53 to 57)	
102 Profit Sharing		151 Commission		152 Profit Sharing	
103 Fees including Director's Fees		153 Fees including Director's Fees		154 Taxable 13th Month Benefits <b>0.00</b>	
104 Taxable 13th Month Benefits <b>0.00</b>		155 Hazard Pay		156 Overtime Pay <b>5,441.61</b>	
105 Hazard Pay		157 Other Benefits		158 4A <b>CD. Incentives</b>	
106 Overtime Pay <b>5,441.61</b>		159 4B		160 Total Taxable Compensation Income (Sum of Items 53 to 57)	
107 Other Benefits		161 Commission		162 Profit Sharing	
108 4A <b>CD. Incentives</b>		163 Fees including Director's Fees		164 Taxable 13th Month Benefits <b>0.00</b>	
109 4B		165 Hazard Pay		166 Overtime Pay <b>5,441.61</b>	
110 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		167 Other Benefits		168 4A <b>CD. Incentives</b>	
111 Commission		169 4B		170 Total Taxable Compensation Income (Sum of Items 53 to 57)	
112 Profit Sharing		171 Commission		172 Profit Sharing	
113 Fees including Director's Fees		173 Fees including Director's Fees		174 Taxable 13th Month Benefits <b>0.00</b>	
114 Taxable 13th Month Benefits <b>0.00</b>		175 Hazard Pay		176 Overtime Pay <b>5,441.61</b>	
115 Hazard Pay		177 Other Benefits		178 4A <b>CD. Incentives</b>	
116 Overtime Pay <b>5,441.61</b>		179 4B		180 Total Taxable Compensation Income (Sum of Items 53 to 57)	
117 Other Benefits		181 Commission		182 Profit Sharing	
118 4A <b>CD. Incentives</b>		183 Fees including Director's Fees		184 Taxable 13th Month Benefits <b>0.00</b>	
119 4B		185 Hazard Pay		186 Overtime Pay <b>5,441.61</b>	
120 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		187 Other Benefits		188 4A <b>CD. Incentives</b>	
121 Commission		189 4B		190 Total Taxable Compensation Income (Sum of Items 53 to 57)	
122 Profit Sharing		191 Commission		192 Profit Sharing	
123 Fees including Director's Fees		193 Fees including Director's Fees		194 Taxable 13th Month Benefits <b>0.00</b>	
124 Taxable 13th Month Benefits <b>0.00</b>		195 Hazard Pay		196 Overtime Pay <b>5,441.61</b>	
125 Hazard Pay		197 Other Benefits		198 4A <b>CD. Incentives</b>	
126 Overtime Pay <b>5,441.61</b>		199 4B		200 Total Taxable Compensation Income (Sum of Items 53 to 57)	
127 Other Benefits		201 Commission		202 Profit Sharing	
128 4A <b>CD. Incentives</b>		203 Fees including Director's Fees		204 Taxable 13th Month Benefits <b>0.00</b>	
129 4B		205 Hazard Pay		206 Overtime Pay <b>5,441.61</b>	
130 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		207 Other Benefits		208 4A <b>CD. Incentives</b>	
131 Commission		209 4B		210 Total Taxable Compensation Income (Sum of Items 53 to 57)	
132 Profit Sharing		211 Commission		212 Profit Sharing	
133 Fees including Director's Fees		213 Fees including Director's Fees		214 Taxable 13th Month Benefits <b>0.00</b>	
134 Taxable 13th Month Benefits <b>0.00</b>		215 Hazard Pay		216 Overtime Pay <b>5,441.61</b>	
135 Hazard Pay		217 Other Benefits		218 4A <b>CD. Incentives</b>	
136 Overtime Pay <b>5,441.61</b>		219 4B		220 Total Taxable Compensation Income (Sum of Items 53 to 57)	
137 Other Benefits		221 Commission		222 Profit Sharing	
138 4A <b>CD. Incentives</b>		223 Fees including Director's Fees		224 Taxable 13th Month Benefits <b>0.00</b>	
139 4B		225 Hazard Pay		226 Overtime Pay <b>5,441.61</b>	
140 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		227 Other Benefits		228 4A <b>CD. Incentives</b>	
141 Commission		229 4B		230 Total Taxable Compensation Income (Sum of Items 53 to 57)	
142 Profit Sharing		231 Commission		232 Profit Sharing	
143 Fees including Director's Fees		233 Fees including Director's Fees		234 Taxable 13th Month Benefits <b>0.00</b>	
144 Taxable 13th Month Benefits <b>0.00</b>		235 Hazard Pay		236 Overtime Pay <b>5,441.61</b>	
145 Hazard Pay		237 Other Benefits		238 4A <b>CD. Incentives</b>	
146 Overtime Pay <b>5,441.61</b>		239 4B		240 Total Taxable Compensation Income (Sum of Items 53 to 57)	
147 Other Benefits		241 Commission		242 Profit Sharing	
148 4A <b>CD. Incentives</b>		243 Fees including Director's Fees		244 Taxable 13th Month Benefits <b>0.00</b>	
149 4B		245 Hazard Pay		246 Overtime Pay <b>5,441.61</b>	
150 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		247 Other Benefits		248 4A <b>CD. Incentives</b>	
151 Commission		249 4B		250 Total Taxable Compensation Income (Sum of Items 53 to 57)	
152 Profit Sharing		251 Commission		252 Profit Sharing	
153 Fees including Director's Fees		253 Fees including Director's Fees		254 Taxable 13th Month Benefits <b>0.00</b>	
154 Taxable 13th Month Benefits <b>0.00</b>		255 Hazard Pay		256 Overtime Pay <b>5,441.61</b>	
155 Hazard Pay		257 Other Benefits		258 4A <b>CD. Incentives</b>	
156 Overtime Pay <b>5,441.61</b>		259 4B		260 Total Taxable Compensation Income (Sum of Items 53 to 57)	
157 Other Benefits		261 Commission		262 Profit Sharing	
158 4A <b>CD. Incentives</b>		263 Fees including Director's Fees		264 Taxable 13th Month Benefits <b>0.00</b>	
159 4B		265 Hazard Pay		266 Overtime Pay <b>5,441.61</b>	
160 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		267 Other Benefits		268 4A <b>CD. Incentives</b>	
161 Commission		269 4B		270 Total Taxable Compensation Income (Sum of Items 53 to 57)	
162 Profit Sharing		271 Commission		272 Profit Sharing	
163 Fees including Director's Fees		273 Fees including Director's Fees		274 Taxable 13th Month Benefits <b>0.00</b>	
164 Taxable 13th Month Benefits <b>0.00</b>		275 Hazard Pay		276 Overtime Pay <b>5,441.61</b>	
165 Hazard Pay		277 Other Benefits		278 4A <b>CD. Incentives</b>	
166 Overtime Pay <b>5,441.61</b>		279 4B		280 Total Taxable Compensation Income (Sum of Items 53 to 57)	
167 Other Benefits		281 Commission		282 Profit Sharing	
168 4A <b>CD. Incentives</b>		283 Fees including Director's Fees		284 Taxable 13th Month Benefits <b>0.00</b>	
169 4B		285 Hazard Pay		286 Overtime Pay <b>5,441.61</b>	
170 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		287 Other Benefits		288 4A <b>CD. Incentives</b>	
171 Commission		289 4B		290 Total Taxable Compensation Income (Sum of Items 53 to 57)	
172 Profit Sharing		291 Commission		292 Profit Sharing	
173 Fees including Director's Fees		293 Fees including Director's Fees		294 Taxable 13th Month Benefits <b>0.00</b>	
174 Taxable 13th Month Benefits <b>0.00</b>		295 Hazard Pay		296 Overtime Pay <b>5,441.61</b>	
175 Hazard Pay		297 Other Benefits		298 4A <b>CD. Incentives</b>	
176 Overtime Pay <b>5,441.61</b>		299 4B		300 Total Taxable Compensation Income (Sum of Items 53 to 57)	
177 Other Benefits		301 Commission		302 Profit Sharing	
178 4A <b>CD. Incentives</b>		303 Fees including Director's Fees		304 Taxable 13th Month Benefits <b>0.00</b>	
179 4B		305 Hazard Pay		306 Overtime Pay <b>5,441.61</b>	
180 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		307 Other Benefits		308 4A <b>CD. Incentives</b>	
181 Commission		309 4B		310 Total Taxable Compensation Income (Sum of Items 53 to 57)	
182 Profit Sharing		311 Commission		312 Profit Sharing	
183 Fees including Director's Fees		313 Fees including Director's Fees		314 Taxable 13th Month Benefits <b>0.00</b>	
184 Taxable 13th Month Benefits <b>0.00</b>		315 Hazard Pay		316 Overtime Pay <b>5,441.61</b>	
185 Hazard Pay		317 Other Benefits		318 4A <b>CD. Incentives</b>	
186 Overtime Pay <b>5,441.61</b>		319 4B		320 Total Taxable Compensation Income (Sum of Items 53 to 57)	
187 Other Benefits		321 Commission		322 Profit Sharing	
188 4A <b>CD. Incentives</b>		323 Fees including Director's Fees		324 Taxable 13th Month Benefits <b>0.00</b>	
189 4B		325 Hazard Pay		326 Overtime Pay <b>5,441.61</b>	
190 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		327 Other Benefits		328 4A <b>CD. Incentives</b>	
191 Commission		329 4B		330 Total Taxable Compensation Income (Sum of Items 53 to 57)	
192 Profit Sharing		331 Commission		332 Profit Sharing	
193 Fees including Director's Fees		333 Fees including Director's Fees		334 Taxable 13th Month Benefits <b>0.00</b>	
194 Taxable 13th Month Benefits <b>0.00</b>		335 Hazard Pay		336 Overtime Pay <b>5,441.61</b>	
195 Hazard Pay		337 Other Benefits		338 4A <b>CD. Incentives</b>	
196 Overtime Pay <b>5,441.61</b>		339 4B		340 Total Taxable Compensation Income (Sum of Items 53 to 57)	
197 Other Benefits		341 Commission		342 Profit Sharing	
198 4A <b>CD. Incentives</b>		343 Fees including Director's Fees		344 Taxable 13th Month Benefits <b>0.00</b>	
199 4B		345 Hazard Pay		346 Overtime Pay <b>5,441.61</b>	
200 Total Taxable Compensation Income (Sum of Items 53 to 57) <b>48,761.10</b>		347 Other Benefits		348 4A <b>CD. Incentives</b>	
201 Commission		349 4B		350 Total Taxable Compensation Income (Sum of Items 53 to 57)	
202 Profit Sharing		351 Commission		352 Profit Sharing	
203 Fees including Director's Fees		353 Fees including Director's Fees		354 Taxable 13th Month Benefits <b>0.00</b>	
204 Taxable 13th Month Benefits <b>0.00</b>		355 Hazard Pay		356 Overtime Pay <b>5,441.61</b>	
205 Hazard Pay		357 Other Benefits		358 4A <b>CD. Incentives</b>	
206 Overtime Pay <b>5,441.61</b>		359 4B		360 Total Taxable Compensation Income (Sum of Items 53 to 57)	
207 Other Benefits		361 Commission		362 Profit Sharing	
208 4A <b>CD. Incentives</b>		363 Fees including Director's Fees		364 Taxable 13th	



V.B. Cabahug Extension, Manda...



iPloy, OPC, 16th floor, One Mont...



33 min



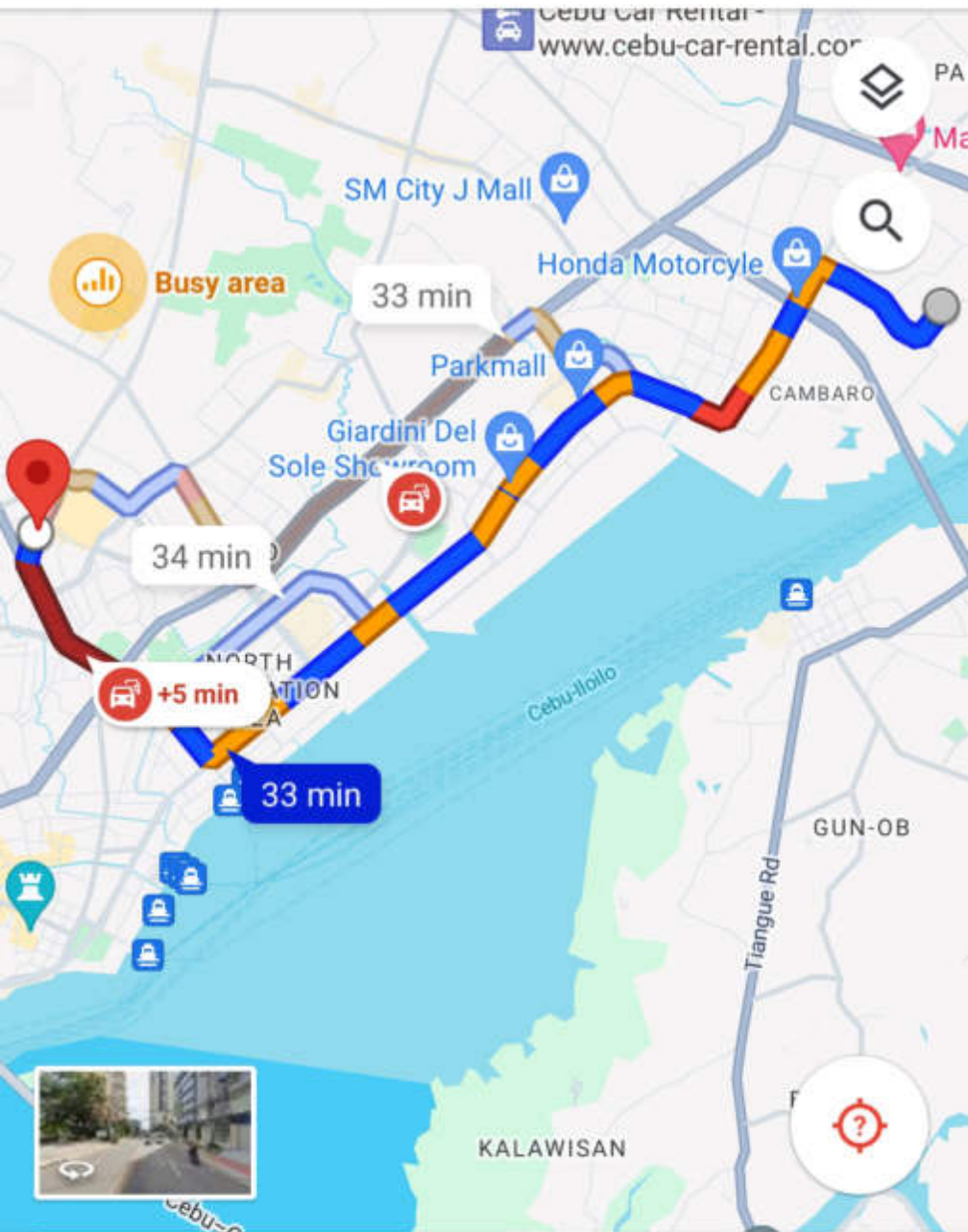
27 min



1 hr 9



1 hr 47



33 min (8.7 km)

Fastest route, despite the usual traffic

>> Preview

☰ Steps

📌 Pin