

Republic of the Philippines
Department of Justice
National Bureau of Investigation

39407633

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
M532FJBN99-ML12973492

FAMILY NAME
MENDOZA

MIDDLE NAME
CABILUNA

ADDRESS
PH 1 BLK 7 LOT 23 BARIUM ST DECA HOMES SUBD BRGY TUNGKIL MINGLANILLA CEBU

DATE OF BIRTH
June 02, 1999

CITIZENSHIP
FILIPINO

PURPOSE
MULTI-PURPOSE CLEARANCE

REMARKS
NO DEROGATORY RECORD

VALID UNTIL
July 29, 2025

FIRST NAME
JOHN

HUSBAND'S SURNAME

PLACE OF BIRTH
CEBU CITY

CIVIL STATUS
SINGLE

GENDER
MALE

SIGNATURE



Date Printed: Thursday, 15 August 2024 11:15 am

Agency ML12 DATID barrientosr
CASID barrientosr BICID barrientosr
O.R. No MP6XJZYDCZ RECID basmayor
O.R. Date 29/07/2024 12:26:28 pm INTID
DST PAID PRID barrientosr



M532FJBN99-ML12973492

JUDGE JAIME B. SANTIAGO (RET.)
Director

Republic of the Philippines
Department of Justice
National Bureau of Investigation

39407633

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
M532FJBN99-ML12973492

FAMILY NAME
MENDOZA

MIDDLE NAME
CABILUNA

ADDRESS
PH 1 BLK 7 LOT 23 BARIUM ST DECA HOMES SUBD BRGY TUNGKIL MINGLANILLA CEBU

DATE OF BIRTH
June 02, 1999

CITIZENSHIP
FILIPINO

PURPOSE
MULTI-PURPOSE CLEARANCE

REMARKS
NO DEROGATORY RECORD

VALID UNTIL
July 29, 2025

FIRST NAME
JOHN

HUSBAND'S SURNAME

PLACE OF BIRTH
CEBU CITY

CIVIL STATUS
SINGLE

GENDER
MALE

SIGNATURE



Date Printed: Thursday, 15 August 2024 11:15 am

Agency ML12 DATID barrientosr
CASID barrientosr BICID barrientosr
O.R. No MP6XJZYDCZ RECID basmayor
O.R. Date 29/07/2024 12:26:28 p BICID
DST PAID PRID barrientosr



M532FJBN99-ML12973492

JUDGE JAIME B. SANTIAGO (RET.)
Director

PERSONAL COPY

UG 15, 2024

Employee Static Information (RRCS)

C.R.N.

SS Number **06-4950935-7**

Date of Birth **06-02-1999**

Member Name **MENDOZA, JOHN CABILUNA**
(Surname, First Name Extension Middle Name)

Date of Coverage

+ Address, Contact & Disbursement Account Enrollment Module Information



LOG MEMBER INITIAL VISIT

MEMBER DETAILS

SS Number Status :	0 - ACTIVE
Document Compliance :	DOCUMENTARY REQUIREMENT(S) SUBMITTED
Membership Status :	PERMANENT
Registration Type :	PRIOR REGISTRANT
Date of SS Number Issuance :	08/15/2024
Sex :	MALE
Reporting Date :	
Reporting ID :	
Latest ER ID :	
Latest ER Name :	
Claim Flag Status :	0 - NO FINAL/FUNERAL CLAIM
Transferred to (New SS Number) :	
Membership Type :	
Change in Coverage Status :	NO STATUS CHANGE
Date of Loan Disqualification :	
SS Number Withdrawal Reason :	
Record Location :	TALISAY

