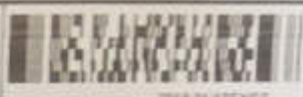




BIR Form No.
2316

**Certificate of Compensation
Payment/Tax Withheld**



January 2018 (ENCS)

For Compensation Payment With or Without Tax Withheld

2018 01-18ENCS

1. For the Year (YYYY) 2023		2. For the Period From (MM/DD) 01 01 To (MM/DD) 06 15	
Part I - Employee Information		Part II-B Details of Compensation Income and Tax Withheld from Present Employer	
3 TIN 403 073 147 0000		A. NON-TAXABLE/EXEMPT COMPENSATION INCOME	
4 Employer's Name (Last Name, First Name, Middle Name) NAVALLO, MARFE ANTONANO		27 Basic Salary (including the exempt P250,000 & 1/3 of the Statutory Minimum Wage of the MWE) 53,685.90	
5 Registered Address 6A Zc Code		28 Holiday Pay (MWE) 0.00	
6 Local Home Address 8C Zc Code		29 Overtime Pay (MWE) 0.00	
7 Date of Birth (MM/DD/YYYY) 8 Telephone Number		30 Night Shift Differential (MWE) 0.00	
9 Statutory Minimum Wage rate per day 0.00		31 Hazard Pay (MWE) 0.00	
10 Statutory Minimum Wage rate per month 0.00		32 13th Month Pay and Other Benefits (Maximum of P40,000) 4,714.70	
11 <input checked="" type="checkbox"/> Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax		33 De Minimis Benefits 0.00	
Part II - Employer Information (Present)		34 SSS, GSIS, PhilC & Pag-ibig Contributions and Union Dues (Employee share only) 4,190.00	
12 Employer 217 595 167 0001		35 Salaries & Other Forms of Compensation 0.00	
13 Employer's Name GOLDEN LION FOODS CONSOLIDACION CORPORATION		36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35) 62,544.60	
14 Registered Address 14A Zc Code NATIONAL HIGHWAY POBLACION ORIENTAL 6001		B. TAXABLE COMPENSATION INCOME REGULAR	
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer		37 Basic Salary 0.00	
Part II - Employer Information (Previous)		38 Representation	
16 TIN		39 Transportation	
17 Employer's Name		40 Cost of Living Allowance (COLA)	
18 Registered Address 8A Zc Code		41 Fixed Housing Allowance	
Part IIIA - Summary		42 Others (Specify) 42A 0.00	
19 Gross Compensation Income from Present Employer (Sum of Items 27 and 36) 62,544.60		43 Commission	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) 62,544.60		44 Profit Sharing	
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 36) 0.00		45 Fees including Director's Fees	
22 Non-Taxable Compensation Income from Previous Employer, if applicable 0.00		46 Taxable 13th Month Pay Benefits 0.00	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 0.00		47 Hazard Pay	
24 Tax Due 0.00		48 Overtime Pay	
25 Amount of Taxes Withheld		49 Others (Specify) 49A 0.00	
25A Present Employer 0.00		49B 0.00	
25B Previous Employer 0.00		50 Total Taxable Compensation Income (Sum of Items 37 and 49B) 0.00	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) 0.00			

I/We declare, under the penalties of perjury, that the certificate has been made in good faith, verified by us, and to the best of 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. Further, I/we give my/our consent to the processing of my/our information, as contemplated under the "Data Privacy Act of 2012" (R.A. No. 10173) for legitimate and lawful purposes.

81 MERIAN S. SAZAR Present Employer Authorized Agent Signature Over Printed Name Date Signed **10 09 20 23**

CONFORME: MARFE ANTONANO NAVALLO Employee Signature Over Printed Name Date Signed _____ Amount Paid, if CTC _____

CT/Chairman of the Board of Directors Place of Issue _____ Date of Issue _____

To be accomplished under substituted filing

83 I declare, under the penalties of perjury, that the information herein stated are reported under BIR Form No. 1004-C which has been filed with the Bureau of Internal Revenue. Present Employer Authorized Agent Signature Over Printed Name (Print of Accounting/ Human Resources or Authorized Representative) MERIAN S. SAZAR

84 I declare, under the penalties of perjury, that I am qualified under substituted filing of Income Tax Returns (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year that taxes have been correctly withheld by my employer (for due credit for tax withheld); that the BIR Form No. 1004-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve as my proof of payment as if BIR Form No. 1700 has been filed pursuant to the provisions of the National Internal Revenue Code, (R.A. No. 2424), as amended. Employee Signature Over Printed Name MARFE ANTONANO NAVALLO

8103818

Republic of the Philippines

Department of Finance
Bureau of Internal Revenue

Republic of the Philippines

Department of Finance

Bureau of Internal Revenue

Republic of the Philippines

372

Republic of the Philippines

TCD201908483896



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

TIN:
403-073-147-00000

Name:
NAVALLO, MARFE ANTONANO

Address:
360 V & O SUBD. 2ND ST. BRGY. NANGKA
CONSOLACION, 6001

Birth Date: 26-Jun-1991 TIN Issuance Date: 08-Aug-2022



CH: 645-201908

Marfe A. Navalto

3/2/2023

(Signature)

Info/2023

Income Tax Return Form

Income Tax Return Form for the year 2018/2019. This form is to be filled up by the taxpayer and submitted to the Revenue District Officer (RDO) for assessment.

Income Tax Return Form for the year 2018/2019. This form is to be filled up by the taxpayer and submitted to the Revenue District Officer (RDO) for assessment.

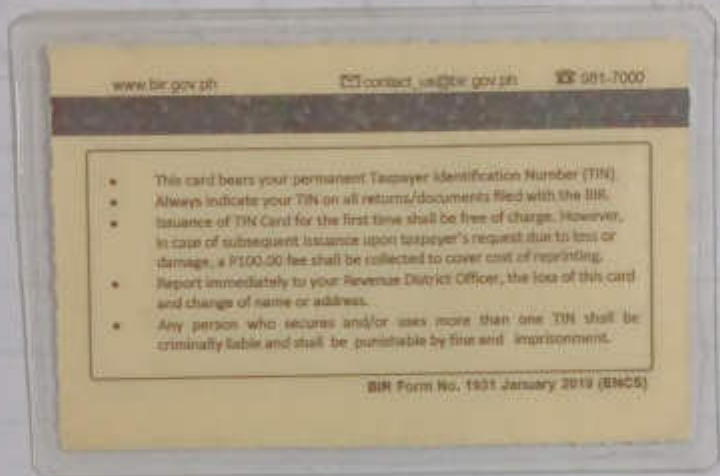
Income Tax Return Form

2018

Income Tax Return Form for the year 2018/2019. This form is to be filled up by the taxpayer and submitted to the Revenue District Officer (RDO) for assessment.

2018

Income Tax Return Form for the year 2018/2019. This form is to be filled up by the taxpayer and submitted to the Revenue District Officer (RDO) for assessment.



Income Tax Return Form

Income Tax Return Form

Income Tax Return Form

Income Tax Return Form

Jollibee®

CERTIFICATION

This is to certify that **Ms. Marfe Navallo** is employed at Golden Lion Foods (Fooda) Corporation – Jollibee Fooda Saversmart as Service Crew from February 01, 2022 to June 08, 2023.

This certification is made upon request of **Ms. Navallo** for whatever legal purpose it may serve.

Given this 21th day of June, 2023 at Jollibee Fooda Saversmart, Consolacion, Cebu.



LAILANIE T. BACO

Restaurant Manager

Jollibee Fooda Saversmart

Golden Lion Foods (Fooda Saversmart) Corp.

Poblacion Oriental, Consolacion Cebu

Tel. No. (032) 236-0171

E-mail Address: jb0788@jollibee.com.ph

Franchisee of Jollibee Foods Corporation





Building F, SM Corporate Offices
1000 Bay Boulevard, SM Central Business Park
Pasay City, 1300
Philippines
Phone: +63.2.552.9700
Fax: +63.2.552.9789

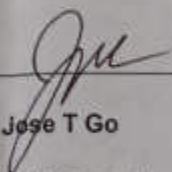
CERTIFICATE OF EMPLOYMENT

This certifies that Marfe P Antonano was previously employed by TeleTech Customer Care Management Philippines, Inc. as CSR I from 10-JAN-11 to 29-MAY-11.

Our main office in Manila is located at Bldg. F, SM Corporate Offices, 1000 Bay Boulevard, SM Central Business Park, Bay City, Pasay City. Our Human Capital Delivery may be contacted thru telephone number 552.9700 from 10:00 P.M. to 6:00 A.M.

This certification is being issued upon the request of Miss. Antonano for whatever legal purpose it may serve her, given this 27th day of July 2011.

Certified true and Correct:



Joel Jose T Go
Senior Manager, Human Capital



Republic of the Philippines
Department of Justice
National Bureau of Investigation



41500164

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
A535FM0E19-ND4700290

FAMILY NAME
ANTONANO

MIDDLE NAME
PEROLINO

ADDRESS
350 V AND G SUBD BRGY NANGKA CONSOLACION CEBU

DATE OF BIRTH
June 26, 1991

CITIZENSHIP
FILIPINO

PURPOSE
MULTI-PURPOSE CLEARANCE

REMARKS
NO RECORD ON FILE

VALID UNTIL
July 29, 2025

FIRST NAME
MARFE

HUSBAND'S SURNAME
NAVALLO

PLACE OF BIRTH
SILAY CITY

CIVIL STATUS
MARRIED



SIGNATURE

(Signature)

GENDER
FEMALE



A535FM0E19-ND4700290

(Signature)
JUDGE JAIME B. SANTIAGO (RET.)
Director

Date Printed: Monday, 29 July 2024 08:45 am
Agency ND4 DATID minguezj
CASID minguezj BIOD minguezj
O.R. No. MP1VT5WNB0 RECID
O.R. Date 07/29/2024 8:45:14 am INTID
DST PAID PRTID minguezj



Municipal Form No. 102
Revised January 2007
Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF LIVE BIRTH
Accomplished in quadruplicate using black ink

Province CEBU Registry No. **2012 19756**
City/Municipality CEBU CITY

CHILD
1. NAME (First) (Middle) (Last)
SAMANTHA YSABELLE ANTONANO NAVALLO
2. SEX (Male / Female) FEMALE
3. DATE OF BIRTH (Day) (Month) (Year)
22 JUNE 2012
4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ House No., St., Barangay)
CEBU PUER. CENTER & MATERNITY HOUSE, INC. CEBU CITY, CEBU
5a. TYPE OF BIRTH (Single, Twin, Triplet, etc.) SINGLE
5b. IF MULTIPLE BIRTH, CHILD WAS (First, Second, Third, etc.) FIRST
5c. BIRTH ORDER (Order of the birth of previous live births, excluding fetal death) (First, Second, Third, etc.) FIRST
5. WEIGHT AT BIRTH (grams) 2,900

MOTHER
7. MAIDEN NAME (First) (Middle) (Last)
MARIE PEROLINO ANTONANO
8. CITIZENSHIP FILIPINO
9. RELIGION/RELIGIOUS SECT Jehovah's Witness
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) 21
13. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)
V&G SUBD. NANGKA, CONSOLACION, CEBU, PHILS.

FATHER
14. NAME (First) (Middle) (Last)
MATTHIEU ERICH BARANDA NAVALLO
15. CITIZENSHIP FILIPINO
16. RELIGION/RELIGIOUS SECT ROMAN CATHOLIC
17. OCCUPATION FASTFOOD MANAGER
18. AGE at the time of this birth (completed years) 27
19. RESIDENCE (House No., St., Barangay) (City/Municipality) (Province) (Country)
V & G SUBD , NANGKA , CONSOLACION, CEBU PHILS.

MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgements/Admission of Paternity at the back.)
20a. DATE (Month) (Day) (Year) NOT MARRIED
20b. PLACE (City / Municipality) (Province) (Country) NOT APPLICABLE

25a. ATTENDANT
1 Physician 2 Nurse 3 Midwife 4 Heil (Traditional Birth Attendant) 5 Others (Specify) Physician

21b. CERTIFICATION OF ATTENDANT AT BIRTH (Physician, Nurse, Midwife, Traditional Birth Attendant, etc.)
I hereby certify that I attended the birth of the child who was born alive 10:34AM am/pm on the date of birth specified above.

Signature Raida G. Varona, M.D. Address CEBU PUER. CNTR & MATERNITY HOUSE, INC., CEBU CITY
Name in Print RAIDA G. VARONA, M.D.
Title or Position PHYSICIAN Date 22 JUNE 2012

22. CERTIFICATION OF INFORMANT
I hereby certify that all information supplied are true and correct to my own knowledge and belief.
Signature Marie P. Antonano
Name in Print MARIE P. ANTONANO
Relationship to the Child MOTHER
Address NANGKA, CONSOLACION, CEBU
Date 22 JUNE 2012

23. PREPARED BY
Signature Clarisa T. Roxas
Name in Print CLARISA T. ROXAS
Title or Position CLERK
Date 22 JUNE 2012

24. RECEIVED BY
Signature Ridolito P. Ybanez
Name in Print RIDOLITO P. YBAÑEZ
Title or Position ADMINISTRATIVE AIDE I
Date JUN 29 2012

25. REGISTERED BY THE CIVIL REGISTRAR
Signature Oscar B. Molo
Name in Print OSCAR B. MOLO
Title or Position ASSISTANT CITY CIVIL REGISTRAR
Date JUN 29 2012

REMARKS/ANNOTATIONS (For LCRO/OCRG Use Only)

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR
11 9 11 12 15 16 17 18

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XL700196406

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02217-812MN13-6
Documentary
Stamp Tax Paid

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





Statistical Form No. 102
Revised 1983

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(To be accomplished in original)

Fill out completely, accurately and legibly in ink or typewriter

PROVINCE Maguindanao LOCAL CIVIL REGISTRY NO. 91-2760
CITY/MUNICIPALITY Silay City

1. NAME (First) MARIE (Middle) PEROLINO (Last) ANTONARO

2. SEX (Place 'X' on appropriate answer) 1 Male X 2 Female
3. DATE OF BIRTH (Day) 26 (Month) June (Year) 1991

4. PLACE OF BIRTH (Name of Hospital/Clinic, if not in hospital, give street/dorongan) Dr. Jose C. Locsin Mem. Hospital (City/Municipality) Silay City (Provincial) Mag. Occ.

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

6. MAIDEN NAME (First) MARCEL H. PEROLINO (Middle) (Last)
7. NATIONALITY FIL. 8. RELIGION I.V.

9. NAME (First) FERNANDO B. ANTONARO (Middle) (Last)
10. NATIONALITY FIL. RELIGION J.W.

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back)
Date AUG. 23, 1990 Place E.B. Maglona, Mag. Occ.

13. CERTIFICATE OF ATTENDANT AT BIRTH (Verify that I attended the birth of the child who was born alive at 8:09 AM on the date stated above.)
Address DICTAD, Silay City

Signature of Informant CRISTINA D. QUARZON, M.D.
Title or position Medical Officer III
Date June 27, 1991

Signature of Informant FERNANDO ANTONARO
Relationship to child Father
Date June 27, 1991

16a. PREPARED BY Signature PLC
Name in print CRISTINA D. QUARZON
Title or position Records Officer I
Date June 27, 1991

16b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Signature RAMON S. VILLAGOR
Name in print REGISTRATION OFFICER IV
Date 6/27/91

17a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT
17b. DATE WHEN INFORMATION WAS SUPPLIED 2420

Important: Informant should also provide information for items 17 to 25. The code boxes are to be filled out at the Office of the Local Civil Registrar.

Local Civil Registry Number 9102760 Registration Status 18

PROVINCE Mag. Occ. CITY/MUNICIPALITY Silay City

17. Weight at Birth (in grams) 2455 18. Birth Order of Child 1st Ex. first, second, etc. 20

19a. Total Number of Children Born Alive 27 19b. How many children are now living including this birth? 24 19c. How many children were born alive but are now dead? 0

20. Usual Occupation Housekeeper 21. Age at the time of this Birth 16

22. Usual Residence Mag. Occ. 23. Usual Occupation Laborer 24. Age at the time of this Birth 25

25. Attendant at Birth (Place 'X' on appropriate answer) X 1 Physician 2 Nurse 3 Midwife 4 Midol 5 Others

Sex 26 Date of Birth 26/06/91 Place of Birth 452660 Mother's Nationality 27 Father's Nationality 28

NAME OF CHILD (First) MARIE (Middle) PEROLINO (Last) ANTONARO

04170-DF-420RHA-00413-BI001
BEST POSSIBLE IMAGE

BREN
04526-A91MS01-8

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



Documentary
Stamp Tax Paid





Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL

accomplished in quadruplicate using back set.

Municipal Form No. 97
(Revised January 2007)

CERTIFICATE OF MARRIAGE

Registry No. **2014-125**

Province CEBU		City/Municipality CONSOLACION	
HUSBAND		WIFE	
1. Name of Contracting Parties	(First) MATTHEU ERICH (Middle) BARANDA (Last) NAVALLO	(First) MARFE (Middle) PERULINO (Last) ANTONANO	
2. Date of Birth	(Day) 19 (Month) October (Year) 1984	(Day) 26 (Month) June (Year) 1991	(Age) 29 (Age) 22
3. Place of Birth	(City/Municipality) Cebu City (Province) Cebu (Country) Phils.	(City/Municipality) Silay City (Province) Negros Occidental (Country)	
4. Sex	Male	Female	
4b. Citizenship	Filipino	Filipino	
5. Residence	350 V&G Subd., Consolacion, Cebu	350 V&G Subd., Consolacion Cebu	
6. Religion/Religious Sect	Roman Catholic	Jehova's Witness	
7. Civil Status	Single	Single	
8. Name of Father	(First) Manuel (Middle) Ageron (Last) Navallo	(First) Fernando (Middle) Batistagan (Last) Antonano	
9. Citizenship	Filipino	Filipino	
10. Maiden Name of Mother	(First) Ms. Elva (Middle) Cahido (Last) Baranda	(First) Maribel (Middle) Manaco (Last) Perolina	
11. Citizenship	Filipino	Filipino	
12. Name of Person Who Gave Consent or Advice		(First) Maricel (Middle) P. (Last) Antonano	
13. Relationship		Mother	
14. Residence		(House No., St., Barangay, City/Municipality, Province, Country) Brgy. Lantad, Silay City Neg. Occidental	
15. Place of Marriage	Municipal Circuit Trial Court, Consolacion, Cebu (Office of the Judge or Judge of Church and Mosque of (City/Municipality))		
16. Date of Marriage	25 March 2014	17. Time of Marriage	11:00 A.M.
18. CERTIFICATION OF THE CONTRACTING PARTIES		18. CERTIFICATION OF THE CONTRACTING PARTIES	
THIS IS TO CERTIFY THAT MATTHEU ERICH B. NAVALLO both of legal age, of our own free will and accord, and in the presence of the person solemnizing the marriage and of the witnesses named below, have entered into a marriage settlement, as husband and wife, and certifying further that we have not entered into a marriage settlement.		THIS IS TO CERTIFY THAT MARFE P. ANTONANO both of legal age, of our own free will and accord, and in the presence of the person solemnizing the marriage and of the witnesses named below, have entered into a marriage settlement, as husband and wife, and certifying further that we have not entered into a marriage settlement.	
IN WITNESS WHEREOF, we have signed (marked with our fingers) the certificate of marriage on the 25th day of March 2014		IN WITNESS WHEREOF, we have signed (marked with our fingers) the certificate of marriage on the 25th day of March 2014	
MATTHEU ERICH B. NAVALLO (Signature of Husband)		MARFE P. ANTONANO (Signature of Wife)	
19. CERTIFICATION OF THE SOLEMNIZING OFFICER			
THIS IS TO CERTIFY THAT BEFORE ME, on the date and place above-written, personally appeared the above-mentioned parties, with their mutual consent, lawfully joined together in marriage which was solemnized by me in the presence of the witnesses named below, all of legal age.			
I CERTIFY FURTHER THAT:			
<input checked="" type="checkbox"/> a. Marriage License No. 199804 issued on March 10, 2014 at Consolacion, Cebu in favor of said parties, was presented to me.			
<input type="checkbox"/> b. No marriage license was necessary, the marriage being solemnized under Art. _____ of Executive Order No. 209.			
<input type="checkbox"/> c. The marriage was solemnized in accordance with the provisions of Presidential Decree No. 1083.			
JOCelyn G. Uy-PO (Signature) (Printed Name of Solemnizing Officer)		Residing Judge (Position/Occupation) (Religion/Religious Sect, Registry No. and Expiration Date, if applicable)	
20a. WITNESSES (Print Name and Sign)			
JOSE LAYSON		CHERYL CASTRO	
JOSE LAYSON		ANGEL O. ENCARNACION	
21. RECEIVED BY		21. REGISTERED BY (THE CIVIL REGISTRAR)	
Signature MAGUI M. BRIGUL		Signature CLARE S. CUYODS	
Name in Print MAGUI M. BRIGUL		Name in Print CLARE S. CUYODS	
Title or Position CLERK		Title or Position REGISTERED CIVIL REGISTRAR	
Date MAR 25 2014		Date MAR 25 2014	
REMARKS/ANNOTATIONS (For LCR/OCRG/Share's Circuit Registrar Use Only)			
TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR			
04H	04W	04	04

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CSM

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





Pag-IBIG Fund
Mandaue Branch

09/18/18

Date

Navallo, Marfe Antonano
Name of Member

Dear Member,

Congratulations!

You have been successfully registered with the Fund. Your

(RTN):

9142-6049-6276

Pag-IBIG/MID #

1211-2767-7161

Use the RTN/MID when remitting your contributions, and if employed, submit your RTN/MID to your HR unit to enable the number-based remittance of your contributions through your employer.

Expect a text message confirming your registration together with your RTN/MID.

ALTERNATIVELY to get your MID, you may email your RTN (3) days after the registration to rtbellita@pagibigfund.gov.ph

Thank you for your continued support with the Fund.

Your Pag-IBIG Fund Family





REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation



PhilHealth
Your Partner in Health



11-050470271-5

NAVALLO, MARFE ANTONANO

JUNE 26, 1981 - FEMALE

350 V AND G SUBD., 2ND ST. BARANGAY NANGKA,
CONSOLACION, CEBU 6001



1 1 0 5 0 4 7 0 2 7 1 5

FORMAL ECONOMY

Signature

SKETCH OF RESIDENCE



MARTE A. NAVARRO

SECURITY SYSTEM

SS NUMBER

07-2559150-6

SOCIAL SECURITY

PERSONAL RECORD

(Please Use Black Ink Only)
(Gumamit ng Itim na Tinta Lamang)



E-1
(Rev. 06/04)

SURNAME (PANGALAN)

Antoniano

GIVEN NAME (PANGALAN)

Marce

MIDDLE NAME (MIDYANG PANGALAN)

Perolino

ADDRESS (NO. & STREET; CITY/TOWN & PROVINCE) (TIRAHAN SA KALAY, LUNGSOD BAYAN AT LALAWIGAN)

Drk. Ipal-Ipal Brgy. Mambalac Silay City Negros Occ.

POSTAL CODE

611116

SEX (KASAHAW)

MALE (LALAK)

FEMALE (BAGAL)

DATE OF BIRTH (KAPANGANAKAN)

016 | 2 | 16 | 19 | 1 | 1

CIVIL STATUS (PAGAYANG SAKI)

SINGLE (WALANG ASAWA)

MARRIED (MAY ASAWA)

WIDOWED (DALOG)

BENEFICIARIES (MAKIKINABANG)

SPOUSE (ASAWA)

FATHER (AMA)

Fernando B. Antoniano

CHILDREN (MGA ANAK)

DATE OF BIRTH (KAPANGANAKAN)

MOTHER (INA)

Marcel P. Antoniano

SECURITY SYSTEM
RECEIVED/VERIFIED BY
ORIGINAL/OWNERS ONLY

	m	m	d	d	y	y
1						
2						
3						
4						
5						

OTHER BENEFICIARIES (IF WITHOUT SPOUSE, CHILD OR PARENT)
(IBANG MAKIKINABANG: KUNG WALANG ASAWA, ANAK O MAGULANG)

	NAME (PANGALAN)	RELATIONSHIP (RELASYON)
1		
2		
3		

THUMBMARK



LEFT (KALIWA)



RIGHT (KANAN)

I hereby certify that the above information are true and correct. (Ako ay nagpapatunay na ang aking mga isinaad ay totoo at tama.)

Signature (Lagda)

PLEASE READ REMINDERS AT THE BACK (BASAHIN ANG PAALALA SA LIKOD)

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TCD201908483886



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE



TIN:

403-073-147-00000

Name:

NAVALLO, MARFE ANTONANO

Address:

350 V & G SUBD. 2ND ST. BRGY. NANGKA
CONSOLACION, 6001

Birth Date:

26-Jun-1991

TIN Issuance Date:

09-Aug-2022

SIGNATURE



CN: 048-2019886

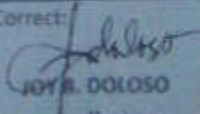



OFFICE OF THE REGISTRAR

OFFICIAL TRANSCRIPT OF RECORDS

Name:	ANTONANO, MARFE P.	Date issued:	January 3, 2011
Birth Date:	June 26, 1991	I.D Number:	08-0087
Birth Place:	Silay City	Sex:	Female
Parent/Guardian:	Maricel Antonano	Nationality:	Filipino
Permanent Address:	Brgy. Lantad, Silay City	Entrance Data:	Form - 138-A
EDUCATION:			
Primary:	Valladolid Elementary School	Year:	2003-2004
Secondary:	E.B Magalona National High School	Year:	2007-2008
Course/Degree:	PROGRAMMING NC IV		
Date of Admission:	August 14, 2008		

COLLEGIATE RECORD

COURSE NO.	DESCRIPTIVE TITLE	GRADES	CREDITS
<i>FIRST SEMESTER, 2008-2009, RATI INC.</i>			
ENGL 1	Communication Skills	1.75	3
MATH 1	Basic Math	2.00	3
Safrac	Health, Hygiene and Safety Sanitation	2.00	(1)
COMP 1	Computer Fundamentals	2.50	2
Soft App	Software Applications 1	1.25	2
PREVAL	Professional Values and Ethics	1.50	3
Prog 1	Introduction to Programming(using C.)	1.75	4
PE 1	Physical Fitness/Gymnastics	1.50	2
NSTP 1	Civic Welfare Training Service I	2.00	3
<i>SECOND SEMESTER, 2008-2009, RATI INC.</i>			
ENGL 2	Writing in the Discipline	1.00	3
MATH 2	College Algebra	2.00	3
Prog2	Programming (using C++)	2.00	3
Prog3	Introduction to Database Design (MS ACCESS)	1.75	3
Soft App2	Software Application II	1.75	2
Priman	Principles of Management	1.25	1
PE 2	Rhythmic Activities	1.25	2
NSTP 2	Civic Welfare Training Service II	1.00	3
SECOND YEAR			
<i>FIRST SEMESTER, 2009-2010, RATI INC.</i>			
ENGL 3	Speech and Oral Communication	1.50	3
MATH 3	Trigonometry	1.50	3
Prog4	Programming IV (Visual Basic)	1.50	3
Prog5	Object-Oriented Programming (Java)	1.75	4
Prog6	Network Operating System	1.25	4
Prog7	Web Page Design and Development	1.75	3
PE3	Individual/Dual Sports	1.25	2
Steno 1	Stenography 1	1.50	(2)
REMARKS : FOR EMPLOYMENT PURPOSES ONLY			
(NOT VALID WITHOUT COLLEGE SEAL)		Certified Correct:	
GRADING SYSTEM		 JOY B. DOLOSO Registrar	
1.0 - (97-100)	2.25 - (82-84)	Incomplete - INC	
1.25 - (95-96)	2.50 - (79-81)	Withdrawn - WDN	
1.50 - (91-93)	2.75 - (77-78)	Dropped - DR	
1.75 - (88-90)	3.0 - (75-76)	Unofficially Dropped - UD	
2.0 - (85-87)	5.0 - (Below 75)		
OR # 3915		Checked By:  LOURDES J. PIDO HRD	
OR Date : 12-17-10			



OFFICE OF THE REGISTRAR

OFFICIAL TRANSCRIPT OF RECORDS

Name:	ANTONANO, MARFE P.	Date issued:	January 3, 2011
Birth Date:	June 26, 1991	I.D Number:	08-0087
Birth Place:	Silay City	Sex:	Female
Parent/Guardian:	Maricel Antonano	Nationality:	Filipino
Permanent Address:	Brgy. Lantad, Silay City	Entrance Data:	Form - 138-A
EDUCATION:			
Primary:	Valladolid Elementary School	Year:	2003-2004
Secondary:	E.B Magalona National High School	Year:	2007-2008
Course/Degree:	PROGRAMMING NC IV		
Date of Admission:	August 14, 2008		

COLLEGIATE RECORD

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SECOND SEMESTER, 2009-2010, RATI INC.			
ENGL 4	Business Correspondence	1.25	3
Prog8	Operating System	1.75	3
Prog9	Apache/MY SQL	1.25	3
Prog10	Web Programming	1.25	3
PE 4	Team/Group Games	1.25	2
OJT	On-the Job Training	2.00	3
Steno 2	Stenography 2	1.50	(2)

*****End of Transcript*****

REMARKS : FOR EMPLOYMENT PURPOSES ONLY

(NOT VALID WITHOUT COLLEGE SEAL)

Certified Correct:

GRADING SYSTEM

1.0 - (97-100)	2.25 - (82-84)	Incomplete - INC
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2.0 - (85-87)	5.0 - (Below 75)	

Joy B. Doloso
JOY B. DOLOSO
 Registrar

Checked By:

Lourdes J. Pido
LOURDES J. PIDO
 HRO