



Republika ng Pilipinas
Republic of the Philippines

Kagawaran ng Edukasyon
Department of Education

REHIYON VIII
REGION VIII

SANGAY NG LEYTE
DIVISION OF LEYTE



JUGABAN NATIONAL HIGH SCHOOL

Pinatutunayan nito na si
This certifies that

SHAIRA F. INDITA

Learner Reference Number (LRN): 121272080070

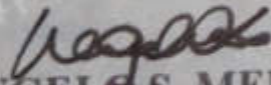
ay kasiya-siyang nakatupad sa mga kinakailangan sa pagtatapos ng Senior High School
has satisfactorily completed the requirements for graduation in Senior High School

ACADEMIC TRACK AND HUMANITIES AND SOCIAL SCIENCES STRAND

na itinakda para sa Mataas na Paaralan ng Kagawaran ng Edukasyon, kaya pinagkalooban siya nitong
prescribed for Secondary Schools of the Department of Education and is therefore awarded this

KATIBAYAN
DIPLOMA

Nilagdaan sa Carigara, Leyte, Pilipinas nitong ika – labing apat ng Hulyo, 2021.
Signed in Carigara, Leyte, Philippines on the 14th day of July, 2021.


NIÑO ANGELO S. MENDOZA
Punong-Guro
Principal


MANUEL P. ALBAÑO, Ph.D., CESO V
Pansangay na Tagapamanihala ng mga Paaralan
Schools Division Superintendent



MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY	
Pag-IBIG MID NO.	121332595168
REGISTRATION TRACKING NO.	923336947039

OCCUPATIONAL STATUS: EMPLOYED						
MEMBERSHIP CATEGORY: EMPLOYED - PRIVATE		Please specify				
PERSONAL DETAILS						
NAME	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME	
MEMBER	INDITA	SHAIRA		FLORENDO	<input type="checkbox"/>	
FATHER	INDITA	HERCULANO	JR	GONZALES	<input type="checkbox"/>	
MOTHER (Maiden Name)	FLORENDO	MARICRIS		ARIZO	<input type="checkbox"/>	
SPOUSE (If Married)					<input type="checkbox"/>	
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	INDITA	SHAIRA		FLORENDO	<input type="checkbox"/>	
DATE OF BIRTH: 06/01/2002		MARITAL STATUS: Single/Unmarried		TAXPAYER IDENTIFICATION NUMBER (TIN)		
PLACE OF BIRTH: CARIGARA, LEYTE			CITIZENSHIP: FILIPINO		SSS NUMBER	
SEX: FEMALE		HEIGHT (cm): 146.00	WEIGHT (kg): 36.00	PROMINENT DISTINGUISHING FACIAL FEATURES		
COMMON REFERENCE NUMBER (CRN)		FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT			EMPLOYEE NUMBER For AFP/PNP 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.	House No.	Street Name	Cell Phone
Subdivision		Barangay			+63 (0963) 3713035
Municipality/City CARIGARA		Province/State/Country LEYTE, PHILIPPINES			Business (Direct Line)
ZIP Code 6529					Business (Trunk Line)
					Email Address inditashaira08@gmail.com
PRESENT HOME ADDRESS					
Unit/Room No., Floor 403		Building Name 16		Lot No.	Block No., Phase No.
House No.		Street Name		Subdivision URBAN DECA HOMES	Barangay TIPOLO
Municipality/City MANDAUE CITY		Province/State/Country CEBU, PHILIPPINES			
PREFERRED MAILING ADDRESS			PERMANENT HOME ADDRESS		

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.





Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

8/F, Golden Peak Tower, Gorordo Ave., cor. Escario St., Cebu City 6000

(032) 233 7407 (032) 233 7523 (032) 233 3287 (fax) (032) 233 3281 (032) 233 7871

www.philhealth.gov.ph

MDR

MEMBER DATA RECORD

MEMBER INFORMATION

PhilHealth Identification Number (PIN) : **012552949925**

Member Category : INFORMAL ECONOMY NHTS Coverage :

Sub-Category : SELF-EARNING INDIVIDUAL Effectivity Period :

INDITA, SHAIRA FLORENDO

DECA HOMES, TIPOLO, MANDAUE CITY,
CEBU 6014

Foreign Address	: N/A	Sex	: Female
		Date of Birth	: 01/06/2002
		Place of Birth	: CARIGARA, LEYTE
Contact No. (Foreign)	: N/A	Civil Status	: SINGLE
(Local)	:	Tax Identification Number	:

EMPLOYER/ORGANIZED GROUP INFORMATION

Philhealth Number (PEN/POGN)	: N/A
Name of Employer/Organized Group	: N/A
Business Address	: N/A
Telephone Number	: N/A
Tax Identification Number	: N/A

DEPENDENT INFORMATION

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

*** NOTHING FOLLOWS ***

MARJORIE A. CABRIETO
REGIONAL VICE PRESIDENT
PRO - VII Cebu City

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.

12/01/2022 3:38:45 pm 30519615 30519615 / / 12/01/2023



(Copy for OCRG)

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 <small>(Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in items 2, 5a, 5b and 19a.)</small>					
Province <u>LEYTE</u>		Registry No. <u>2002-118</u>			
City/Municipality <u>CARIGARA</u>					
CHILD	1. NAME (First) (Middle) (Last) <u>Shaira Florendo Indita</u>		For OCRG USE ONLY: Population Reference No.		
	2. SEX <input checked="" type="checkbox"/> 1 Male <input type="checkbox"/> 2 Female		3. DATE OF BIRTH (day) (month) (year) <u>6 January 2002</u>		
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>CDL Carigara Leyte</u>		TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR		
	5a. TYPE OF BIRTH <input checked="" type="checkbox"/> 1 Single <input type="checkbox"/> 2 Twin <input type="checkbox"/> 3 Triplet, etc.		b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify		41
	c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) <u>Fifth</u>		d. WEIGHT AT BIRTH <u>2405</u> grams		48
MOTHER	6. MAIDEN NAME (First) (Middle) (Last) <u>Maricris Ariso Florendo</u>		49 50		
	7. CITIZENSHIP <u>Philipino</u>		8. RELIGION <u>RC</u>		56
	9a. Total number of children born alive: <u>5</u>	b. No. of children still living including this birth: <u>5</u>	c. No. of children born alive but are now dead: <u>0</u>		61
	10. OCCUPATION <u>Housewife</u>		11. Age at the time of this birth: <u>27</u> years		62 64
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Jugaban Carigara Leyte</u>		63 69		
FATHER	13. NAME (First) (Middle) (Last) <u>Maximiliano Gonzales Indita Jr.</u>		70 72 78		
	14. CITIZENSHIP <u>Philipino</u>		15. RELIGION <u>RC</u>		75 79
	16. OCCUPATION <u>Chainaw Operator</u>		17. Age at the time of this birth: <u>27</u> years		81
	18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>November 21, 1991- Carigara, Leyte</u>				
	19a. ATTENDANT <input checked="" type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input type="checkbox"/> 4 Healer (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)		75 79		
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>10:50</u> o'clock <u>am/pm</u> on the date stated above.					
Signature <u>[Signature]</u> Name in Print <u>LIVANAO L. AYERSON, M.D.</u> Title or Position <u>Medical Officer III</u>		Address <u>CDL, Carigara, Leyte</u> Date <u>January 24, 2002</u>		86 87 1590	
20. INFORMANT Signature <u>[Signature]</u> Name in Print <u>MARICRIS P. INDITA</u> Relationship to the child <u>Mother</u> Address <u>Carigara, Leyte</u> Date <u>January 24, 2002</u>					
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>MARICRIS P. INDITA</u> Title or Position <u>BRU 9</u> Date <u>January 24, 2002</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>TERESITA C. PILANDE</u> Title or Position <u>MCR</u> Date <u>January 24, 2002</u>			

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BEST POSSIBLE IMAGE



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AL500435978

BReN
03715-B02B601-1

Documentary
Stamp Tax Paid

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

