



Republic of the Philippines
 Department of Justice
 National Bureau of Investigation



39373204

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 C146EVOY09-LG1727582	VALID UNTIL May 15, 2025
FAMILY NAME CABALLERO	FIRST NAME VIC ASHLY
MIDDLE NAME MENESES	HUSBAND'S SURNAME
ADDRESS 586 BONIFACIO ST PUROK NCYSC BRGY NORTH POB CITY OF NAGA CEBU	
DATE OF BIRTH May 15, 1990	PLACE OF BIRTH VALENZUELA CITY METRO MANILA
CITIZENSHIP FILIPINO	CIVIL STATUS SINGLE
PURPOSE MULTI-PURPOSE CLEARANCE	GENDER MALE



SIGNATURE

REMARKS NO DEROGATORY RECORD



Date Printed: Wednesday, 22 May 2024 98:16 am

Agency	LG	DATO	umambac
CASID	umambac	BIOID	umambac
O.R. No.	MPT42GLFNP	RECIS	gayada
O.R. Date	05/15/2024 3:29:04 pm	INTID	
DST PAID		PRTD	umambac



C146EVOY09-LG1727582

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

CERTIFICATION OF EMPLOYMENT

To Whom It May Concern:

This is to certify that **Vic Ashly Caballero** was a **Customer Service Representative** of OfficePartners 360, Inc. from **26-Sep-2022** to **31-Mar-2024**.

We further confirm that **Vic Ashly Caballero** has completed the exit clearance process and has been cleared from any and all liabilities.

Issued this **13-May-2024 11:55:47**.

Prepared by:



Jasmin Love Maloloy-on
Human Resource Manager
OfficePartners 360, Inc.

E-mail: BackgroundVerificationRequest@officepartners360.com

For verification, you may send an email to hrteam@officepartners360.com

PHILIPPINES

 Central Bloc One,
Cebu IT Park,
Cebu City

 EBloc 2,
Cebu IT Park,
Cebu City

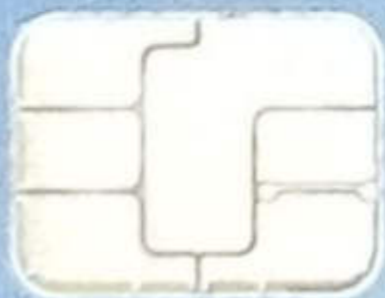
 Topaz Tower,
Damosa IT Park,
Davao City

 Diamond Tower,
Damosa IT Park,
Davao City

 SM Downtown Tower,
Cagayan de Oro,
Misamis Oriental



Pag-IBIG *Plus*
LOYALTY CARD



VIC ASHLY M. CABALLERO

MID No. **1211-5954-6760**



3*1500*1044*023108





Municipal Form No. 102
(Revised 1988)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH

(To be accomplished in triplicate)

(Fill out completely, accurately and legibly in ink or typewriter)

CENSUS: LINE REGISTRATION

PROVINCE METRO M.A. LOCAL CIVIL REGISTRY NO. 90-5457
CITY/MUNICIPALITY VALENZUELA

1. NAME (First) (Middle) (Last)
VIC ASALY MENESES CABALLERO

SEX (Place 'X' on appropriate answer) 1 Male 2 Female
3. DATE OF BIRTH (Day) (Month) (Year)
15 MAY 1990

4. PLACE OF BIRTH (Name of Hospital/Institution; if not in hospital, give street/barangay) (City/Municipality) (Province)
8 ACEBO ST. MARULAS VALENZUELA M.M.

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

6. MAIDEN NAME (First) (Middle) (Last) 7. NATIONALITY 8. RELIGION
ALICIA R. MENESES PHIL RC

9. NAME (First) (Middle) (Last) 10. NATIONALITY 11. RELIGION
VICTORIANO T. CABALLERO PHIL RC

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important if not applicable, fill Affidavit of Acknowledgment at the back).
JUNE 21, 1988 MARULAS VAL. M.M.

CERTIFICATE OF ATTENDANT AT BIRTH
I hereby certify that I attended the birth of the child who was born alive at _____ o'clock a.m./p.m. on the date stated above.

Signature _____ Address _____
Name in print _____
Title or position Hilot Date _____

14. INFORMANT
Signature Alicia Caballero Address 8 ACEBO ST. MARULAS
Name in print ALICIA CABALLERO VAL. M.M.
Relationship to child MOTHER Date 6-8-90

15a. PREPARED BY
Signature JAC b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR
Name in print JULIANA A. CARINO Signature _____ 2580
Title or position RN Name in print NESTOR S. JEAN
Date 6-8-90 Title or position ASST. REGISTRATION OFFICER
Date _____

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

(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)

PROVINCE METRO M.A. Local Civil Registry No. 90050157 Registration Status 2
CITY/MUNICIPALITY VALENZUELA

RESERVE FOR BINDING

17. Weight at Birth (in grams) 3999 18. Birth Order of Child (first, second, etc.) 1st 011
19a. Total Number of Children Born Alive 1 011 b. How many children are now living including this birth? 1 011 c. How many children were born alive but are now dead? 0 010
20. Usual Occupation HOUSEWIFE 210 21. Age at the time of this Birth 31 31
22. Usual Residence (Barangay) (City/Municipality) (Province)
SACEBO ST. MARULAS VALENZUELA M.M. 751010
23. Usual Occupation LABORER 220 24. Age at the time of this Birth 36 36
25. Attendant at Birth (Place 'X' on appropriate answer) 1 Physician 2 Nurse 3 Midwife 4 Hilot 5 Others

Sex 1 2 Date of Birth 150590 Place of Birth 90050157 Mother's Nationality 1 2 Father's Nationality 1 2
NAME OF CHILD First M.I. Last
VIC ASALY M CABALLERO

"PAKITA SA MUNDO. UMAAGAN SA TAYO".

06562-4G-400MCP-00762-BI001
BEST POSSIBLE IMAGE



T40006562400076212192017001
RL300551868

BReN
07504-A90JFOC-6

Documentary
Stamp Tax Paid

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





AFFIDAVIT OF ACKNOWLEDGMENT

(Both parents or the mother alone may accomplish the Affidavit)

We/I _____ and _____ parents/
(Father) (Mother)

parent of the child mentioned in the Certificate of Live Birth, do hereby solemnly swear that the information contained herein are true and correct to the best of our/my knowledge and belief.

(Signature of Father) _____ (Signature of Mother) _____
Residence Certificate No. _____ Residence Certificate No. _____
Date Issued _____ Date Issued _____
Place Issued _____ Place Issued _____

SUBSCRIBED AND SWORN to before me this _____ day of _____ 19____
at _____ Philippines.

(Signature of Administering Officer) _____ (Title/Designation) _____
(Name in Print) _____ (Address) _____

AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH

(Not applicable for births prior to February 27, 1931. Either the person himself if 21 years old or over, or father/mother/guardian may accomplish the affidavit)

I, Alicia M. Caballero, of legal age, single/married and with residence and postal address of Acaba St., Val., N. Mla., after having been duly sworn to in accordance with law, do hereby depose and say:

1. That I am the applicant for the delayed registration of my birth / of the birth of Vic Ashly M. Caballero
2. That I/he/she was born on May 15, 1990.
3. That I/he/she is a citizen of the Philippines.
4. That the reason for the delay in registering my/his/her birth was due to my negligence.
5. That a copy of my/his/her birth certificate is needed for the purpose of registration.
6. a. (For the applicant only) That I am married to _____
b. (For father/mother/guardian) That I am the father/mother/guardian of the said person.

Alicia M. Caballero
ALICIA M. CABALLERO
(Signature of Applicant)
Residence Certificate No. 43259084-K
Date Issued 6/28/90 Place Issued Val., N. Mla.

SUBSCRIBED AND SWORN to before me this _____ day of _____ 19____
at Valenzuela, N. Mla. Philippines.

(Signature of Administering Officer) _____ (Title/Designation) _____
REGISTRAR OFFICER (Name in Print) _____ (Address) _____

HOW TO ACCOMPLISH THIS FORM

1. Accomplish this form in triplicate copies. Upon registration submit the original and duplicate copies to the Local Civil Registrar, and keep the third copy for your personal file.
2. Type or write legibly in ink on the blank spaces provided.
3. Fill up all items in this form completely and accurately.
4. For correctness and accuracy of data, the mother or the father shall be preferred as informant over any other person.
5. The informant shall be asked to sign item 14 of this form upon completion. Before doing so he should review the answers for each item and make sure that the entries made therein are all correct and that the name of the child as well as the names of the parents are correctly spelled.
6. Registration status refers to whether or not registration is delayed. If delayed, place '2' in box 15; otherwise place '1'

PENALTY CLAUSE OF ACT NO. 3753

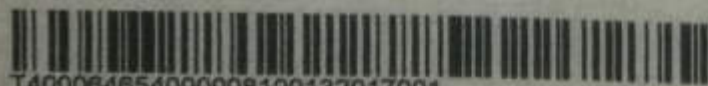
Section 16—False Statements—Any person who shall knowingly make false statements in the forms furnished and shall present the entry in the civil registrar, shall be punished by imprisonment for not less than one month nor more than six, or by a fine of not less than two hundred pesos nor more than five hundred or both, in the discretion of the court.

Section 17—Failure to Report—Other Violations—Any person whose duty is to report any fact concerning the civil status of persons and who knowingly fails to perform such duty, and any person convicted of having violated any of the provisions of this Act, shall be punished by a fine of not less than ten nor more than two hundred pesos.

Section 18—Neglect of Duty with Reference to the Provisions of this Act. Any local civil registrar who fails to properly perform his duties in accordance with the provisions of this Act and of the regulations issued hereunder, shall be punished, for the first offense, by an administrative fine in a sum equal to his salary for not less than fifteen days nor more than three months, and for a second or repeated offense, by removal from the service.

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NL100928204

BReN
07504-A90JF0C-6

Documentary
Stamp Tax Paid

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

06-3133833-2

SOCIAL SECURITY SYSTEM
PERSONAL RECORD

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



E-1
 (Rev. 08/94)

SURNAME (APELYIDO)

GIVEN NAME (PANGALAN)

MIDDLE NAME (GITNANG PANGALAN)

ADDRESS (NO. & STREET; CITY/TOWN & PROVINCE) (TIRAHAN: BILANG AT KALYE, LUNGSOD/BAYAN AT LALAWIGAN)

POSTAL CODE

SEX (KASARIAN)

DATE OF BIRTH (KAPANGANAKAN)

CIVIL STATUS (KATAYUANG SIBIL)

 MALE
 (LALAKI)

 FEMALE
 (BABAE)

m m d d y y

 SINGLE
 (WALANG ASAWA)

 MARRIED
 (MAY ASAWA)

 WIDOWED
 (BALO)

BENEFICIARIES (MAKIKINABANG)

SPOUSE (ASAWA)

FATHER (AMA)

CHILDREN
(MGA ANAK)DATE OF BIRTH
(KAPANGANAKAN)

MOTHER (INA)

m m d d y y

 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
 (Ako ay nagpapatunay na ang aking mga isinaad
 information are true and correct.
 ay totoo at tama.)

Signature (Lagda)



St. Cecilia's College Cebu - Inc.

LASSO Supervised School

Highway, Poblacion, Minglanilla, Cebu

Tel nos. 268-4746/490-0767

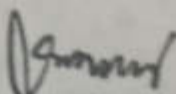
CERTIFICATION

This is to certify that Caballero, Vic Ashly M. was enrolled as a BSED-English-III Student in the College Department, of St. Cecilia's College- Cebu, Inc. First Semester, Academic Year 2015-2016.

This certification is issued upon his request for Employment requirement purposes only.

Given this 9th day of May, 2019 at St. Cecilia's College-Cebu, Inc.

Prepared by:


LEIDE KATHERINE A. ABELLA
School Registrar

Not valid without
School seal