



Office of the Punong Barangay

# Barangay Certification

This is to certify that the person whose name, signature, and personal details appear below is a resident of Barangay Labangon.

**Name:** Alfred N. Gentapa  
**Address:** Mariano Abella St., Labangon Cebu City  
**Age:** 21  
**Civil Status:** Single  
**Citizenship:** Filipino  
**Purpose:** First Time Jobseeker for Employment




This certification is issued upon the request of the above-named person to support for whatever legal purposes it may serve best.

This is to further certify that the above-named person is qualified to avail of the First Time Jobseekers Act of 2019 (R.A. 11261).

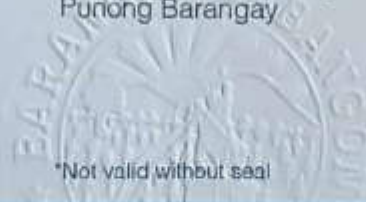
Given this 22<sup>nd</sup> of August 2024 at Barangay Labangon, Cebu City, Philippines.

OR No. ...  
 Amount Paid Free  
 Valid Until December 2024

  
**Clarabelle Borja**  
 Barangay Treasurer

  
**Hon. Derrick C. Yap**  
 Punong Barangay

**Alfred N. Gentapa**  
 Signature



\*Not valid without seal

- Sangguniang Barangay Members
- Hon. Renato A. Alburo
  - Hon. Nathan Philipp C. Amores
  - Hon. Victor M. Buendia
  - Hon. Rodolfo C. Tabasa
  - Hon. Norvic S. Abella
  - Hon. Vic Hermogenes Z. Lozano
  - Hon. Frangil L. Dagatan

**Joshua G. Abella**  
 Barangay Secretary

**Clarabelle Borja**  
 Barangay Treasurer

**Hon. Kim Kyle Buendia**  
 SK Chairperson

- Sangguniang Kabataan Members
- Hon. MJ A. Brigole
  - Hon. Angel Grace P. Quimzon
  - Hon. Junel I. Marzon
  - Hon. Maria Danah Rose P. Zabate
  - Hon. Clarenz G. Dacian
  - Hon. Lynard E. Dela Calzada Jr.
  - Hon. Richlyn Ann L. Bendanillo

# OATH OF UNDERTAKING

Republic Act 11261-First time Jobseeker Assistance Act

I, **Alfred N. Gentapa**, 21 years of age, resident at/in Mariano Abella St., Labangon Cebu City, for 21 years availing the Republic of Act 11261, otherwise known as First Time Jobseeker Act 2019, do hereby declare, agree and undertake to abide and be bound by the following.

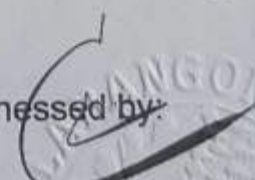
1. This is the first time that I will actively look for a job, and therefore requesting that a Barangay Certification be issued in my favor to avail the benefits of the law;
2. That I am aware that the benefit and privilege/s under the said law shall be valid only for one (1) year from the date that the Barangay Certification is issued;
3. That I can have the benefits of the law only once;
4. That I understand that my personal information shall be included in the Roster/List of First Time Jobseeker and will not be used for any unlawful purpose;
5. That I will inform and/or report to the Barangay personally, through text or means, or through my family/relatives once I get employed;
6. That I am not beneficiary of the Job Start Program under R.A No. 10869 and other laws that give similar exemption for the documents or transactions exempted under R.A No. 11261
7. That if issued the Certification, I will not use the same in any fraud, neither falsify nor help and/or assist in the fabrication of the said certification;
8. Certification consistent with objective of R.A No. 11261 and not any other purposes; and
9. That I consent the use to my personal information pursuant to the Data Privacy Act and other applicable laws, rules, and regulations.

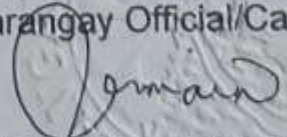
Issued this 22<sup>nd</sup> day of August, 2024 at Labangon Barangay Hall, Cebu City Philippines.

Signed by:

\_\_\_\_\_  
First time Jobseeker

Witnessed by:

  
HON. DERRICK C. YAP  
Barangay Official/Captain

  
GERMAIN C. BARGAMENTO  
Barangay Secretary



**Concentrix CVG Philippines, Inc.**

6798 Ayala North Exchange Tower 2,  
Ayala Ave. cor Amorsolo Salcedo St. Brgy. San  
Lorenzo  
Makati City 1200, Philippines  
84238700 loc 351092  
hr.autoresponse@concentrix.com

**CERTIFICATE OF EMPLOYMENT**

This is to certify that Mr. ALFRED NAVARRO GENTAPA was an employee of Concentrix CVG Philippines, Inc. Mr. GENTAPA was employed as Advisor I, Customer Service under Operations from April 03, 2023 up to June 24, 2024.

Mr. GENTAPA is cleared from any accountability from the company.

This certification is being issued upon the request of Mr. GENTAPA for whatever legal purpose it may serve

Should you have a clarification on the foregoing, you may contact 84238700 loc 351092.

Issued on July 11, 2024.

This document is a system generated printout and does not require a signature

The information in this document may be confidential and privileged and is valid solely for the purpose it was intended. If you are not the intended recipient, any disclosure copying, distribution, or any action taken in reliance on it, is prohibited and may be unlawful. If you receive, this document in error, please notify the sender immediately and delete all copies of this document.

**CONCENTRIX CORPORATION**

**FREE EYE CHECK-UP**

Beside Cashier Counter

RIGHT EYE:

LEFT EYE:

lyclinics & Diagnostic Center, Inc.  
Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City  
2273/266-3245  
alpha.ph

**SERVICE ORDER**



**SOLUTIONS**  
16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City  
(Capital), Cebu  
09177097074 / 09171575430

Priority No.	0012
SO No.	472098
S.O Date	08/27/2024
Terms	30 Days
Amount Due	P800.00

**PATIENT INFORMATION**

PATIENT ID : 104679  
 PATIENT NAME : GENTAPA, ALFRED, NAVARRO  
 PATIENT ADDRESS : Labangon, Cebu City (Capital), Cebu  
 MOBILE NO. : 0969 120 9778  
 EMAIL ADDRESS :  
 REQUESTING PHYSICIAN :  
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS  
 RESULT DELIVERY : DELIVERY

GENDER : Male  
 BIRTHDATE : 04/20/2003  
 AGE : 21  
 CIVIL STATUS : Single  
 SC/PWD ID :  
 HMO CARD NO. :  
 PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME PE CHEST PA, CBC, UA, SE DRUG TEST (NOTE: PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE (CONYTEXT AVAILMENT.) PRIME CARE BIO DONE	1	800.00	800.00

SUMMARY OF CHARGES	
TOTAL SALES	800.00
VARIABLE SALES	0.00
V-A-T	0.00
SC/PWD DISCOUNT	0.00
AMOUNT DUE	800.00

PREPARED BY:

Arissa Marie L. Armenion

ACKNOWLEDGED BY:

*Gentapa*  
Signature Over Printed Name

VERIFIED BY:

**VALIDATED**  
Signature Over Printed Name

BY:  
Date Created: 08/27/2024 07:35 AM

I acknowledge that I was duly informed by Prime Care Alpha employee to pay the above mentioned tests. I have reviewed the prices listed on the (SO) and agree to the changes associated with the products and services.

\*\*\*\* THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM \*\*\*\*

○ Sabina Dormitory

○ iPloy,OPC

Marco Polo Plaza Cebu

LAHUG (POB.)

GUADALUPE

Casilda's

Cebu City

18 min

McDonald's  
Paseo Arcenas

20 min

AStrip Building  
Recently viewed

FORTIS GYM - Tres  
De Abril, Labangon  
Recently viewed

20 min

Security Ba



MAMBALING

2000 ft

1 km

CCLEX - Cebu City



Republic of the Philippines  
Department of Justice  
National Bureau of Investigation



420116670

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. <b>G531DATD30-R71651573</b>	VALID UNTIL <b>August 22, 2025</b>
FAMILY NAME <b>GENTAPA</b>	FIRST NAME <b>ALFRED</b>
MIDDLE NAME <b>NAVARRO</b>	HUSBAND'S SURNAME
ADDRESS <b>MARIANO ABELLA ST BRGY LABANGON CEBU CITY</b>	
DATE OF BIRTH <b>April 20, 2003</b>	PLACE OF BIRTH <b>TANDAG SURIGAO DEL SUR</b>
CITIZENSHIP <b>FILIPINO</b>	CIVIL STATUS <b>SINGLE</b>
PURPOSE <b>MULTI-PURPOSE CLEARANCE</b>	



SIGNATURE

*Alfred Gentapa Navarro*

REMARKS <b>NO RECORD ON FILE</b>
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Date Printed: Thursday, August 22, 2024 04:04 PM



G531DATD30-R71651573

JUDGE JAIME B. SANTIAGO (RET.)  
Director

Agency	R7	DATID	villarinn
CASID	villarinn	BIOD	villarinn
C.R. No.	MP6NQ2X555	RECID	
C.R. Date	08/22/2024 4:01:51 PM	INTID	
DST PAID		PRTID	villarinn



Republic of the Philippines  
Department of Justice  
National Bureau of Investigation



420116670

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CITIZENSHIP <b>FILIPINO</b>	CIVIL STATUS <b>SINGLE</b>
PURPOSE <b>MULTI-PURPOSE CLEARANCE</b>	



SIGNATURE

*Alfred Gentapa Navarro*

REMARKS <b>NO RECORD ON FILE</b>
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Date Printed: Thursday, August 22, 2024 04:04 PM



G531DATD30-R71651573

JUDGE JAIME B. SANTIAGO (RET.)  
Director

Agency	R7	DATID	villarinn
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C.R. No.	MP6NQ2X555	RECID	
C.R. Date	08/22/2024 4:01:51 PM	INTID	
DST PAID		PRTID	villarinn

**PERSONAL COPY**



(Copy for OCRG)

Municipality 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 (Fill out completely, accurately and legibly. Use ink or typewriter. Place X before the appropriate answer in Items 2, 5a, 5b and 19a.)						
Province <u>Surigao del Sur</u> City/Municipality <u>Tandag</u>			Registry No. <u>2003-014</u>			
C H I L D	1. NAME (First) (Middle) (Last) <u>ALFRED</u> <u>NAVARRO</u> <u>GENTAPA</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>28</u> <u>April</u> <u>2003</u>			
	4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province) House No., Street, Barangay) <u>San Agustin Sur, Tandag, Surigao del Sur</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.		5b. IF MULTIPLE BIRTH, CHILD WAS <input type="checkbox"/> 1 First <input type="checkbox"/> 2 Second <input type="checkbox"/> 3 Others, Specify		45 <u>2003014</u>	
M O T H E R	6. MAIDEN NAME (First) (Middle) (Last) <u>Rosalyn</u> <u>ASON</u> <u>NAVARRO</u>		46 <input checked="" type="checkbox"/>			
	7. CITIZENSHIP <u>Filipino</u>		8. RELIGION <u>Protestant</u>			
	9a. Total number of children born alive: <u>92</u>		9b. No. of children still living including this birth: <u>92</u>		47 <u>18110</u>	
	9c. No. of children born alive but are now dead: <u>00</u>		10. OCCUPATION <u>Housekeeper</u>			
F A T H E R	11. Age at the time of this birth: <u>30</u> years		48 <input type="checkbox"/>			
	12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province) <u>Parek Talay, San Agustin Sur, Tandag, Surigao del Sur</u>			49 <input type="checkbox"/>		
	13. NAME (First) (Middle) (Last) <u>Alberto</u> <u>Del Valle</u> <u>Gentapa, Jr.</u>		50 <input type="checkbox"/>			
	14. CITIZENSHIP <u>Filipino</u>		15. RELIGION <u>Roman Catholic</u>			
16. OCCUPATION <u>Farmer</u>		17. Age at the time of this birth: <u>34</u> years				
18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.) <u>July 28, 1996 - Block 69, Lot 6, BDD, Cavite</u>						
19a. ATTENDANT <input type="checkbox"/> 1 Physician <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Midwife <input checked="" type="checkbox"/> 4 Hilot (Traditional Midwife) <input type="checkbox"/> 5 Others (Specify)			51 <input type="checkbox"/>			
19b. CERTIFICATION OF BIRTH I hereby certify that I attended the birth of the child who was born alive at <u>9:00 p.m.</u> o'clock am/pm on the date stated above.			52 <input type="checkbox"/>			
Signature <u>[Signature]</u> Name in Print <u>ARRETA M. CAVILAN</u> Title or Position <u>Hilot</u>		Address <u>San Agustin Sur, Tandag, Surigao del Sur</u> Date <u>April 23, 2003</u>				
20. INFORMANT Signature <u>[Signature]</u> Name in Print <u>ALBERTO GENTAPA, JR.</u> Relationship to the child <u>father</u>		Address <u>San Agustin Sur, Tandag, Surigao del Sur</u> Date <u>April 23, 2003</u>				
21. PREPARED BY Signature <u>[Signature]</u> Name in Print <u>VIGORITA C. BALO</u> Title or Position <u>Registration Officer</u> Date <u>April 23, 2003</u>		22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR Signature <u>[Signature]</u> Name in Print <u>VIGORITA C. BALO</u> Title or Position <u>Reg. Civil Registrar</u> Date <u>04-23-03</u>				

03047-G9-726DMD-00035-BI002

BEST POSSIBLE IMAGE



T726030477260003505052008002

BReN  
06819-B03GL02-3

[Signature]  
 CARMELITA N. ERICTA  
 Administrator and Civil Registrar General  
 National Statistics Office



## MEMBER'S DATA FORM (MDF)

FOR Pag-IBIG Fund USE ONLY	
Pag-IBIG MID NUMBER	121289255435
REGISTRATION TRACKING NUMBER	921288330516

OCCUPATIONAL STATUS		UNEMPLOYED/NOT YET EMPLOYED			
MEMBERSHIP CATEGORY					
PERSONAL DETAILS					
NAME	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME
MEMBER	GENTAPA	ALFRED		NAVARRO	<input type="checkbox"/>
FATHER	GENTAPA	ALBERTO	JR	DEL VALLE	<input type="checkbox"/>
MOTHER (Maiden Name)	NAVARRO	ROSALYN		ASON	<input type="checkbox"/>
SPOUSE (If Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	GENTAPA	ALFRED		NAVARRO	<input type="checkbox"/>
DATE OF BIRTH	MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)		
04/20/2003	Single/Unmarried				
PLACE OF BIRTH		CITIZENSHIP		SSS NUMBER	
TANDAG, SURIGAO DEL SUR		FILIPINO		GSIS NUMBER	
SEX	HEIGHT (cm.)	WEIGHT (kg.)	PROMINENT DISTINGUISHING FACIAL FEATURES		
MALE	168.00	65.00			
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
			HUYONG-HUYONG		+63 (0967) 9404106
Subdivision		Barangay		Business (Direct Line)	
		CABATBATAN		Business (Trunk Line)	
Municipality/City		Province/State/Country		Email Address	
SAN FERNANDO		CEBU, PHILIPPINES		alfrednvrro@gmail.com	
ZIP Code					
6018					
PRESENT HOME ADDRESS					
Unit/Room No., Floor		Building Name		Lot no., Block no., Phase No.	
House No		Street Name		Subdivision	
		URGELLO STREET		SAMBAG I	
Municipality/City		Province/State/Country		ZIP Code	
CEBU CITY		CEBU, PHILIPPINES		6000	
PREFERRED MAILING ADDRESS		PRESENT HOME ADDRESS			

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.





Republic of the Philippines

**PHILIPPINE HEALTH INSURANCE CORPORATION**

Corporate Action Center Hotline - (02) 441-7442

www.philhealth.gov.ph



**MEMBER DATA RECORD**

**MEMBER BASIC INFORMATION**

PhilHealth Identification Number (PIN) : **01-265344794-7** PhilSys Number :  
 Member Category : DIRECT CONTRIBUTOR -  
 Sub-Category : EMPLOYED PRIVATE NHTS Coverage : N/A  
 Validity Period : N/A - N/A

**GENTAPA, ALFRED NAVARRO**

AVIDA CENTERA HIGHWAY HILLS, MANDALUYONG CITY SECOND DISTRICT

Foreign Address : N/A Sex : MALE  
 Date of Birth : 04/20/2003  
 Place of Birth : TANDAG CITY, SURIGAO DEL SUR  
 Contact No. (Foreign) : N/A Civil Status : SINGLE  
 (Local) : +639691209778 Tax Identification Number :

**ENTITY INFORMATION**

PhilHealth Number (PEN/POGN) : 230474000900  
 Name of Employer/Organized Group : CONCENTRIX CVG PHILIPPINES INC(CONVERGYS PHILIPPINES INC)  
 Business Address : 6798 AYALA NORTH EXCHANGE TOWER 2 AYALA AVE COR AMORSOLO, SAN LORENZO, MAKATI CITY FOURTH DIST.  
 Telephone Number : 91655670 Employment Status : EMPLOYED  
 Tax Identification Number : 205366921000 Date : 04/01/2023

**DEPENDENT INFORMATION**

PIN	Surname	Given Name	Middle Name	Sex	Relation	Date of Birth
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\*\*\* NOTHING FOLLOWS \*\*\*

**ATTY. RECTO M. PANTI**  
 BRANCH MANAGER  
 NCR Central Quezon City

Paalala: Basahin ang nilalaman ng MDR. Kung may kulang o mali, ibalik agad upang maiwasto. Ingatan ang orihinal na kopya at huwag ibigay kahit kanino. Kung sakaling gagamit at makikinabang ng benepisyong, 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 MDR and do not hand it over to anybody. Provide photocopy to hospital in case of confinement and availment of benefits.)

This is a Member Portal System generated report. Signature is not required.

Aug 22, 2024 01:10 PM



# Professional Academy of the Philippines

City of Naga, Cebu

*Pinatutunayan nito na si*

*This certifies that*

## ALFRED N. GENTAPA

Learner Reference Number [LRN]: 119621080026

*Ay kasiya-siyang nakapatupad sa mga kinakailangan sa pagtatapos ng Senior High School*  
Has satisfactorily completed the requirements for graduation in Senior High School

### GENERAL ACADEMIC STRAND

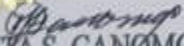
*Na itinakda para sa Mataas na Paaralan ng Kagawaran ng Edukasyon, kaya pinagkalooban siya nitong*  
Prescribed for Secondary Schools of the Department of Education and is therefore awarded this

# KATIBAYAN

## DIPLOMA

*Nilagdaan sa Professional Academy of the Philippines, South Poblacion,*  
Signed at the Professional Academy of the Philippines, South Poblacion,  
*City of Naga, Cebu Philippines, sa ika-12 ng Mayo, 2021*  
City of Naga, Cebu, Philippines, on this 12th day of May, 2021

  
NENITA S. CANOMON  
Principal

  
DR. ARTEMIO I. RANGANIBAN JR.  
President





**GENTAPA, ALFRED NAVARRO**

SS Number: 35-1174705-3

Your password will expire on Dec 18, 2024 | Your last login was on Jun 21, 2024 3:22:57 AM thru the SSS Website

**Member Details**

**Address & Contact Information**

SS Number Status :	0 - ACTIVE
Document Compliance :	APPLICATION THRU SSS WEB/MOBILE APP - WITH NO SUBMITTED DOCUMENT(S)
Membership Status :	TEMPORARY
Prior Registrant :	NO
Date of SS Number Issuance :	10/14/2021
Sex :	MALE
Reporting Date :	04-19-2023
Reporting ID :	03-9147935-3
Latest ER ID :	03-9147935-3
Latest ER Name :	CONCENTRIX CVG PHILIPPINES, IN
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	



BIR Form No.  
**2316**

**Certificate of Compensation  
Payment/Tax Withheld**



September 2021 (ENCS)

For Compensation Payment With or Without Tax Withheld

2316 9/21ENCS

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

<p><b>1</b> For the Year (YYYY) <b>2 0 2 4</b></p> <p><b>Part I - Employee Information</b></p> <p><b>3</b> TIN <b>6 3 8 - 7 6 1 - 6 6 3 - 0 0 0 0</b></p> <p><b>4</b> Employee's Name (Last Name, First Name, Middle Name) <b>Gentapa, Alfred, Navarro</b></p> <p><b>5</b> RDO Code <b>0 0 0</b></p> <p><b>6</b> Registered Address <b>Reliance, Pines,</b></p> <p><b>6A</b> ZIP Code <b>1 5 5 0</b></p> <p><b>6B</b> Local Home Address</p> <p><b>6C</b> ZIP Code</p> <p><b>6D</b> Foreign Address</p> <p><b>7</b> Date of Birth (MM/DD/YYYY) <b>0 4 2 0 2 0 0 3</b></p> <p><b>8</b> Contact Number</p> <p><b>9</b> Statutory Minimum Wage rate per day</p> <p><b>10</b> Statutory Minimum Wage rate per month</p> <p><b>11</b> <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax</p> <p><b>Part II - Employer Information (Present)</b></p> <p><b>12</b> TIN <b>2 0 5 - 3 6 6 - 9 2 1 - 0 0 0 0</b></p> <p><b>13</b> Employer's Name <b>CONCENTRIX CVG PHILIPPINES, INC.</b></p> <p><b>14</b> Registered Address <b>GF 14th to 25th Flr 6798 Ayal</b></p> <p><b>14A</b> ZIP Code <b>1 2 2 6</b></p> <p><b>15</b> Type of Employer <input checked="" type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer</p> <p><b>Part III - Employer Information (Previous)</b></p> <p><b>16</b> TIN</p> <p><b>17</b> Employer's Name</p> <p><b>18</b> Registered Address</p> <p><b>18A</b> ZIP Code</p> <p><b>Part IVA - Summary</b></p> <p><b>19</b> Gross Compensation Income from Present Employer (Sum of Items 38 and 52) <b>153,248.70</b></p> <p><b>20</b> Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 38) <b>51,287.13</b></p> <p><b>21</b> Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 52) <b>101,961.57</b></p> <p><b>22</b> Add: Taxable Compensation Income from Previous Employer, if applicable <b>0.00</b></p> <p><b>23</b> Gross Taxable Compensation Income (Sum of Items 21 and 22) <b>101,961.57</b></p> <p><b>24</b> Tax Due <b>0.00</b></p> <p><b>25</b> Amount of Taxes Withheld</p> <p><b>25A</b> Present Employer <b>0.00</b></p> <p><b>25B</b> Previous Employer, if applicable <b>0.00</b></p> <p><b>26</b> Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B) <b>0.00</b></p> <p><b>27</b> 5% Tax Credit (PERA Act of 2008)</p> <p><b>28</b> Total Taxes Withheld (Sum of Items 26 and 27) <b>0.00</b></p>	<p><b>2</b> For the Period From (MM/DD) <b>0 1 0 1</b> To (MM/DD) <b>0 6 2 3</b></p> <p><b>Part IV-B Details of Compensation Income &amp; Tax Withheld from Present Employer</b></p> <p><b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b> Amount</p> <p><b>29</b> Basic Salary (including the exempt P250,000 below) or the Statutory Minimum Wage of the MWE</p> <p><b>30</b> Holiday Pay (MWE)</p> <p><b>31</b> Overtime Pay (MWE)</p> <p><b>32</b> Night Shift Differential (MWE)</p> <p><b>33</b> Hazard Pay (MWE)</p> <p><b>34</b> 13th Month Pay and Other Benefits (maximum of P90,000) <b>27,823.04</b></p> <p><b>35</b> De Minimis Benefits <b>13,221.35</b></p> <p><b>36</b> SSS, GSIS, PHIC &amp; PAG-IBIG Contributions and Union Dues (Employee share only) <b>10,242.74</b></p> <p><b>37</b> Salaries and Other Forms of Compensation <b>0.00</b></p> <p><b>38</b> Total Non-Taxable/Exempt Compensation Income (Sum of Items 29 to 37) <b>51,287.13</b></p> <p><b>B. TAXABLE COMPENSATION INCOME REGULAR</b></p> <p><b>39</b> Basic Salary <b>86,789.16</b></p> <p><b>40</b> Representation</p> <p><b>41</b> Transportation</p> <p><b>42</b> Cost of Living Allowance (COLA)</p> <p><b>43</b> Fixed Housing Allowance</p> <p><b>44</b> Others (specify)</p> <p><b>44A</b></p> <p><b>44B</b></p> <p><b>SUPPLEMENTARY</b></p> <p><b>45</b> Commission</p> <p><b>46</b> Profit Sharing</p> <p><b>47</b> Fees Including Director's Fees</p> <p><b>48</b> Taxable 13th Month Benefits <b>0.00</b></p> <p><b>49</b> Hazard Pay</p> <p><b>50</b> Overtime Pay</p> <p><b>51</b> Others (specify)</p> <p><b>51A</b> <b>OTHER TAXABLE INCOME</b> <b>15,172.41</b></p> <p><b>51B</b></p> <p><b>52</b> Total Taxable Compensation Income (Sum of Items 39 to 51B) <b>101,961.57</b></p>
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I/We declare, under the penalties of perjury that this certificate has been made in good faith, verified by me/us, and to the best of my/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.

**53** EDENREY RAMOS *[Signature]*  
Present Employer/Authorized Agent Signature over Printed Name

Date Signed

**CONFORME:**

**54** Gentapa Alfred Navarro  
Employee Signature over Printed Name

Date Signed

CTC/Valid ID No. of Employee                      Place of Issue                     

Date Issued                      Amount paid, if CTC                     

**To be accomplished under substituted filing**

I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.

**55** EDENREY RAMOS *[Signature]*  
Present Employer/Authorized Agent Signature over Printed Name  
(Head of Accounting/Human Resource or Authorized Representative)

I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (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 (tax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.

**56** Gentapa Alfred Navarro  
Employee Signature over Printed Name

\*NOTE: The BIR Data Privacy is in the BIR website (www.bir.gov.ph)