



Member Information

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Member Information

PhilHealth Identification Number	12-252706333-5
Last Name	LACSAMANA
First Name	KAMALA GIALLOU
Middle Name	NGOHO
Name Extension	
Sex	FEMALE
Date of Birth	04/27/2000
Email Address	
Mobile Number	+639616292198
Telephone Number	
Permanent Address	BUNGTOD (POB.), BOGO CEBU
Mailing Address	
Member Category	DIRECT CONTRIBUTOR - EMPLOYED PRIVATE
Konsulta Provider	MEDGRUPPE POLYCLINICS AND DIAGNOSTIC CENTER, INC.

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