

FEB 17, 2017

Employee Static Information

C.R.N.

SS Number	06-3085300-9	Date of Birth	08-25-1991
Member Name	ABAYON, HANNAH STEPHANI MARILAO	Date of Coverage	01-2011

Address & Contact Information**MEMBER DETAILS**

E-1 Flag Status :	E-1 FILED
Sex :	FEMALE
Reporting Date :	03-10-2011
Reporting ID :	06-1736166-6
Latest ER ID :	06-1787417-9
Latest ER Name :	LEADAMORPHOSIS INC.
Claim Flag Status :	NO CLAIM
SS Number Status :	SS NUMBER ACTIVE
Transferred to (New SS Number) :	
Coverage Status :	COVERED EMPLOYEE
Change in Coverage Status :	NO STATUS CHANGE
Date of Loan Disqualification :	
SS Number Withdrawal Reason :	
Record Location :	CEBU
SMB PB Enrollment Information :	<ul style="list-style-type: none">MEMBER NOT YET ENROLLED IN THIS PROGRAM