

Employee Static Information

C.R.N.

SS Number 06-3863339-9

Date of Birth 06-18-1996

Member Name MAYAGMA, LEIZL VILLACAMPO

Date of Coverage 10-2016

Address & Contact Information

MEMBER DETAILS

E-1 Flag Status :	E-1 FILED
Sex :	FEMALE
Reporting Date :	11-21-2016
Reporting ID :	06-1798715-0
Latest ER ID :	06-1798715-0
Latest ER Name :	AZPIRED 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

