

Employee Static Information

C.R.N.

SS

Number

06-3731110-4

Date of
Birth

09-04-1996

Member

Name

**YU, MICHELLE FAITH
BUDIONGAN**

Date of
Coverage

09-2015

Address & Contact Information



LOG MEMBER INITIAL VISIT

MEMBER DETAILS

E-1 Flag Status : E-1 FILED
Sex : FEMALE
Reporting Date : 10-22-2015
Reporting ID : 03-9127438-3
Latest ER ID : 06-1748144-9
Latest ER Name : PINOY CARE VISA CENTER 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 : QUEZON CITY
SMB PB Enrollment
Information :

- MEMBER NOT YET ENROLLED IN THIS PROGRAM



Social Security System
Web Inquiry System
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