

BUREAU OF INTERNAL REVENUE REVENUE DISTRICT NO. 081 CEBU CITY NORTH CLIENT SUPPORT SECTION TIN VERIFICATION

| 111: 321-750-1911-000 |
|---|
| LAST NAME: Tray |
| FIRST NAME: Aubrey |
| MIDDLE NAME: N/A |
| DATE OF BIRTH: Sept-24, 1994 |
| RDO: 080 |
| TAXPAYER CLASSIFICATION: LOCAL EMPLOYEE |
| My |

BIR Authorized Signature

NOTE: PLEASE READ/ PALIHUG BASAHA
Please present BIRTH CERTIFICATE or ID or any
Document showing NAME and BIRTHDATE