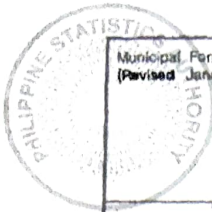


(Copy for OCRG)



Municipal Form No. 102  
(Revised January 1993)

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL  
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly. Use ink or typewriter.  
Place X before the appropriate answer in items 2, 5a, 5b and 19a.)

Province Tawi-Tawi  
City/Municipality Bongao

Registry No. 96-072

**1. NAME** (First) JOANNE (Middle) LOPEZ (Last) EGAR

**2. SEX** X 1 Male    2 Female

**3. DATE OF BIRTH** (day) (month) (year)  
9 January 1996

**4. PLACE OF BIRTH** (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
Datu Halun St. Poblacion Bongao Tawi-Tawi

**5a. TYPE OF BIRTH**  
X 1 Single    2 Twin    3 Triplet, etc.

**b. IF MULTIPLE BIRTH, CHILD WAS**  
   1. First    2. Second    3. Others, Specify

**c. BIRTH ORDER** (five births and fetal deaths including this delivery)  
1st (first, second, third, etc.)

**d. WEIGHT AT BIRTH**  
3500 grams

**6. MAIDEN NAME** (First) Luvictoria (Middle) Manili (Last) Lopez

**7. CITIZENSHIP** Filipino

**8. RELIGION** Catholic

**9a. Total number of children born alive:** 1

**b. No. of children still living including this birth:** 1

**c. No. of children born alive but are now dead:** 0

**10. OCCUPATION** Teller

**11. Age at the time of this birth:** 33 years

**12. RESIDENCE** (House No., Street, Barangay) (City/Municipality) (Province)  
Datu Halun St. Poblacion Bongao Tawi-Tawi

**13. NAME** (First) Eddie (Middle) Elmedalan (Last) Egar

**14. CITIZENSHIP** Filipino

**15. RELIGION** Catholic

**16. OCCUPATION** Laborer

**17. Age at the time of this birth:** 26 years

**18. DATE AND PLACE OF MARRIAGE OF PARENTS:** (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)

March 16, 1994, Bongao, Tawi-Tawi

**19a. ATTENDANT**

   1 Physician    2 Nurse    3 Midwife  
X 4. Hilot (Traditional Midwife)    5. Others (Specify)

**19b. CERTIFICATION OF BIRTH**

I hereby certify that I attended the birth of the child who was born alive at 8:35 o'clock am/pm on the date stated above.

Signature Teodora Hameto  
Name in Print TEODORA HAMETO  
Title or Position Hilot

Address Bongao, Tawi-Tawi  
Date January 15, 1996

**20. INFORMANT**

Signature L. Egar  
Name in Print LUVICTORIA L. EGAR  
Relationship to the child Mother

Address Datu Halun St. Bongao  
Tawi-Tawi  
Date January 15, 1996

**21. PREPARED BY**

Signature L. Egar  
Name in Print LUVICTORIA L. EGAR  
Title or Position Teller  
Date January 15, 1996

**22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR**

Signature MARIEL G. PANFORA  
Name in Print MARIEL G. PANFORA  
Title or Position MEDICAL CLERK  
Date Jan. 24, 1996

For OCRG USE ONLY - Population Reference No. 7003-996 B 901-4

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

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BReN  
07002-A96B901-1

Documentary  
Stamp Tax Paid

*Lisa Grace S. Bersales*  
LISA GRACE S. BERSALES, Ph.D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority





# University of San Jose - Recoletos

## Office of the Registrar

Magallanes St., Cebu City, 6000 Philippines

☎ (+6332) 253-7900 local 260-264

✉ registrar@usjr.edu.ph



PAASCU ACCREDITED

April 6, 2016

TO WHOM IT MAY CONCERN:

This is to certify that **MS. JOANNE L. EGAR** graduated from this University with the degree of **BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION - MARKETING MANAGEMENT (BSBA-Mktg Mgt)** on **March 19, 2016**.

This is to certify, further, that she was exempted from the requirements of Special Order for graduation, having graduated from the University of San Jose-Recoletos, with **ENGLISH** language as the medium of instruction, an accredited-member of the Philippine Accrediting Association of Schools, Colleges and Universities (PAASCU) and a Private Higher Education Institution (PHEI) with **Full Autonomy Status** in accordance with Republic Act (RA) 7722.

This is to certify, furthermore, that the exemption from the issuance of Special Order granted to PAASCU-accredited courses of study is mandated by Batas Pambansa Blg. 232, otherwise known as the Education Act of 1982, as implemented by MECS Order No. 36, series of 1984; and the Commission on Higher Education (CHED) attests our deregulated status as Level III institution.

This certification is issued upon request for **employment** purposes.

  
ATTY. JANET B. UY-DACUDAO  
University Registrar

NOT VALID WITHOUT

SEAL

OR#1338584/erf





# University of San Jose - Recoletos

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Magallanes St., Cebu City, 6000 Philippines

☎ (+6332) 253-7900 local 260-264

✉ registrar@usjr.edu.ph



PAASCU ACCREDITED

# OFFICIAL TRANSCRIPT OF RECORDS

**EGAR**

( Last Name )

**JOANNE**

( First Name )

**LOPEZ**

( Middle Name )

### PERSONAL DATA

Date of Birth : **January 9, 1996**

Place of Birth : **Bongao, Tawi-tawi**

Religion : **Roman Catholic**

Parent : **Mr. Edie Egar**

Address : **Datu Halen St., Bongao, 7500 Tawi-tawi**  
**Cell #: 09330473839**

Email Address : **joanelopez129@gmail.com**

Gender : **Female**

Civil Status : **Single**

Citizenship : **Filipino**

ACR No :

Date Issued:



### PRELIMINARY EDUCATION

Elementary : **Salamat Elementary School**

Secondary : **Notre Dame of Bongao**

Entrance Credential(s) to College: **F 138, F 137-A**

Year Completed: **2007-2008**

Year Completed: **2011-2012**

### [ GRADING SYSTEM ]

GRADE		EQUIVALENT	INDICATION
1.0	A+	100 - 95%	Excellent
1.1 - 1.5	A	94 - 90%	Superior
1.6 - 2.0	B+	89 - 85%	Very Good
2.1 - 2.5	B	84 - 80%	Good
2.6 - 2.9	B-	79 - 76%	Fair
3.0	C	75%	Passed
3.1 - 4.0			Conditioned ( valid for prelim and mid-term only )
5.0	C-	74% and below	Failed
W			Withdrawn
NC			No Credit
INC			Incomplete

One unit credit is one hour lecture or recitation each week for a total of 18 weeks in one semester. Three hours of laboratory work, drafting, shopwork, or field work each week is equivalent to one unit of credit.

The semestral average grade of a student is obtained by multiplying the number of units assigned to a course by the grade earned. The sum of the products is divided by the total number of units earned by the student for the semester.

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**ATTY. JANET B. UY-DACUDAO**  
University Registrar



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PAASCU ACCREDITED

# OFFICIAL TRANSCRIPT OF RECORDS

**EGAR**

( Last Name )

**JOANNE**

( First Name )

**LOPEZ**

( Middle Name )

Course No.	Descriptive Title	Final Grade	Removal Grade	Credit Units
<b><u>BSBA-Mktg Mgt - 1</u></b>		<b><u>1st Semester 2012-2013</u></b>		
CWTS 11*	Civic Welfare Training Services 11	1.00		3.0
Econ 1	Principles of Economics with Taxation & Land Reform	1.50		3.0
English 1	Study and Thinking Skills	2.20		3.0
Filipino 1	Komunikasyon sa Akademikong Pilipino	1.70		3.0
Finance 1	Basic Finance	1.40		3.0
Guidance 1	Adjustment to College Life (Phase I)	1.10		0.0
KB 1	Basic Keyboarding & Word Processing	1.50		3.0
Math B	Mathematics of Investment	2.00		3.0
Mktg 1	Principles of Marketing	1.10		3.0
P.E. 1*	Physical Fitness	1.20		2.0
<b><u>BSBA-Mktg Mgt - 1</u></b>		<b><u>2nd Semester 2012-2013</u></b>		
Acctg A	Fundamentals of Accounting	1.80		3.0
CWTS 12*	Civic Welfare Training Services 12	1.20		3.0
English 2	Writing in the Discipline	1.90		3.0
Ent 1	Entrepreneurial Management	1.00		3.0
Guidance 2	Adjustment to College Life (Phase 2)	1.20		0.0
HRD 1	Principles of Management	1.50		3.0
Math 1	College Algebra	2.50		3.0
Mktg 2	Consumer Behavior	1.20		3.0
P.E. 2*	Rhythmic Activities	1.40		2.0
ReEd 1	Revelation and Faith	1.40		3.0
<b><u>BSBA-Mktg Mgt - 2</u></b>		<b><u>1st Semester 2013-2014</u></b>		
Acctg B	Partnership Accounting	2.20		3.0
English 3	Speech Improvement and Oral Communications	1.80		3.0
Filipino 2	Pagbasa't Pagsulat sa Iba't-ibang Disiplina	1.80		3.0
HRD 2	Human Resource Management	1.60		3.0
Math C	Quantitative Analysis in Business	2.10		3.0
Mktg 9	Advertising and Sales Promotion	1.10		3.0
Nat Sci 1	Earth Sciences w/ Wise Conservation & Utilization of Natural Resources	1.40		3.0

Purpose : **For Employment**

Page 1 of 3

Date Issued : **April 4, 2016**

Checked By : **ROLANDO S. MANTALABA**

Prepared By : **ERLINE C. FUENTES**

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ATTY. JANET B. UY-DACUDAO  
University Registrar



# University of San Jose - Recoletos

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# OFFICIAL TRANSCRIPT OF RECORDS

**EGAR**

( Last Name )

**JOANNE**

( First Name )

**LOPEZ**

( Middle Name )

Course No.	Descriptive Title	Final Grade	Removal Grade	Credit Units
<b>BSBA-Mktg Mgt - 2</b> <span style="float:right"><b>1st Semester 2013-2014</b></span>				
P.E. 3*	Individual/Dual Sports/Games	1.10		2.0
Pol Sci 1	Politics and Governance (with Philippine Constitution)	2.30		3.0
<b>BSBA-Mktg Mgt - 2</b> <span style="float:right"><b>2nd Semester 2013-2014</b></span>				
CS A1	IT Fundamentals, Excel & Power Point	1.80		3.0
Econ 2B	Microeconomics	1.70		3.0
Law A	Obligations & Contracts	2.50		3.0
Mktg 5	Marketing Management	1.70		3.0
Mktg 6	Retail Management	1.20		3.0
Mktg 8	Service Marketing Management	1.40		3.0
P.E. 4*	Team Sports/Games	1.20		2.0
Psych 1	General Psychology	1.80		3.0
ReEd 2	Christology	1.50		3.0
<b>BSBA-Mktg Mgt - 2</b> <span style="float:right"><b>Summer 2014</b></span>				
COA 4	Desktop Publishing	1.50		3.0
Mktg 12	Pricing Policies and Practices	1.40		3.0
Nat Sci 2	Biological Sciences w/ Human Ecology & Family Planning	2.50		3.0
<b>BSBA-Mktg Mgt - 3</b> <span style="float:right"><b>1st Semester 2014-2015</b></span>				
HRD 3	Human Behavior in Organization	2.00		3.0
Mktg 17	International Marketing	1.10		3.0
Mktg 4	Product Management	1.80		3.0
Mktg 7	Sales Management	1.20		3.0
Philo 1	Logic	1.70		3.0
ReEd 3	Church and Sacraments	1.40		3.0
Rizal	Life, Works & Writings of Dr. Jose Rizal	1.90		3.0
Tax A	Income Taxation	3.00		3.0
<b>BSBA-Mktg Mgt - 3</b> <span style="float:right"><b>2nd Semester 2014-2015</b></span>				
Acctg C	Corporation Accounting	2.50		3.0
BA 5	Business Ethics and Social Responsibility and Good Governance	2.40		3.0

Page 2 of 3

Purpose : **For Employment**

Date Issued : **April 4, 2016**

Checked By : **ROLANDO S. MANTALABA**

Prepared By : **ERLINE C FUENTES**

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**ATTY. JANET B. UY-DACUDAO**  
University Registrar





# University of San Jose - Recoletos

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# OFFICIAL TRANSCRIPT OF RECORDS

**EGAR**

( Last Name )

**JOANNE**

( First Name )

**LOPEZ**

( Middle Name )

Course No.	Descriptive Title	Final Grade	Removal Grade	Credit Units
<b><u>BSBA-Mktg Mgt - 3</u></b>		<b><u>2nd Semester 2014-2015</u></b>		
English 7	Business English Correspondence	1.90		3.0
HRD 9	Total Quality Management	1.80		3.0
Mktg 16	Marketing Research Part I	1.60		3.0
Mktg 21	Special Topics in Marketing	1.30		3.0
ReEd 4	Christian Morality	1.10		3.0
Tax B	Business & Other Taxes	1.70		3.0
<b><u>BSBA-Mktg Mgt - 4</u></b>		<b><u>1st Semester 2015-2016</u></b>		
Acctg D	Managerial Accounting	1.30		3.0
Finance 16	Practicum	1.60		6.0
Law B	Negotiable Instruments	2.60		3.0
Math D	Business Statistics with Demography	2.40		3.0
Mktg 18	Strategic Management	2.50		3.0
Mktg 20	Marketing Research Part II	1.40		3.0
<b><u>BSBA-Mktg Mgt - 4</u></b>		<b><u>2nd Semester 2015-2016</u></b>		
Law C	Partnership & Corporation Laws	2.00		3.0
Lit 1	The Literatures of the Philippines	1.20		3.0
Mktg 11	Distribution Management	1.40		3.0
Mktg 14	E-Commerce and Internet Marketing	1.40		3.0
Mktg 22	Systems Application Program	1.70		3.0

## GRADUATED

### BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION - MARKETING MANAGEMENT

( BSBA-Mktg Mgt )

March 19, 2016

PAASCU ACCREDITED

EXEMPTED FROM

SPECIAL ORDER

✕ ✕ ✕ ENTRIES BELOW THIS LINE ARE CONSIDERED NULL AND VOID ✕ ✕ ✕

Purpose : **For Employment**

Date Issued : **April 4, 2016**

Checked By : **ROLANDO S. MANTALABA**

Prepared By : **ERLINE C. FUENTES**

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ATTY. JANET B. UY-DACUDAO  
University Registrar



# University of San Jose - Recoletos

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Magallanes St., Cebu City, 6000 Philippines

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PAASCU ACCREDITED



**ASIAN COLLEGE OF TECHNOLOGY**  
INTERNATIONAL EDUCATIONAL FOUNDATION



### OFFICE OF THE REGISTRAR

March 4, 2016

The Registrar  
University of San Jose-Recoletos  
Magallanes St., Cebu City

Madam:

We take pleasure of sending you the final grade of the subject enrolled by MS. JOANNE L. EGAR during second semester, A.Y. 2015-2016 in the ASIAN COLLEGE OF TECHNOLOGY, Cebu City.

Subject	Description	Grade	Units	Remarks
PROSAL	Professional Salesmanship	1.8	3.0	Passed

Official Marks:

1.0 - 1.5	Excellent
1.6 - 2.0	Very Good
2.1 - 2.5	Good
2.6 - 3.0	Passed
5.0	Failed
DR	Dropped
NG	No Grade
NC	No Credit
W	Withdrawn

This is issued under Special Permit to take the above subjects in this school issued by your institution dated November 10, 2015.

Very truly yours,

  
VIANNIE LOQUERO  
Registrar

NOT VALID  
WITHOUT  
SEAL

University of San Jose-Recoletos  
OFFICE OF THE REGISTRAR  
Cebu City, Philippines

This is a certified photocopy of the original student's records filed in this office.

  
ATTY. JAN B. UY-DACUDAO  
University Registrar



Galileo Satellite  
Control Systems - Cebu


Juan Bautista Chapel


 **My  
home  
location**

La macant

IGLC Monte  
School Incorpor

J & J'Eater

 **Tint Muh Ride  
Escario Cebu City**  
Motorcycle shop

 **La Purisima  
Concepcion**





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 the  
gate of  
our house

Cebu City, Central Visayas

## Member Inquiry

063939097-4

## Employee Static Information

C.R.N.	0111-9758200-3	Member Name	EGAR, JOANNE LOPEZ
SS Number	06-3939097-4	Date of Coverage	08-2018
Date of Birth	01-09-1996		

Member Info Benefit SMEC Loans Premium Payments Eligibility Documents

## Member Details

Sex:	F
Reporting Date:	09-25-2018
Reporting ID:	06-1808375-2
Latest ER ID:	06-1808375-2
Latest ER Name:	SUPERYACHT ACADEMY IN ASIA AND
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

## Address &amp; Contact Information

Local Home Address :	CAMPUHAW (POB.) CEBU CITY (CAPITAL) CEBU 6000
Local Mailing Address :	1000 JUANA OSMENA CAPITOL SITE (POB.) CEBU CITY (CAPITAL) CEBU 6000
Landline :	
Mobile :	09073481409
Email Address :	joanneiopez129@gmail.com
Foreign Home Address :	
Foreign Mailing Address :	





REPUBLIC OF THE PHILIPPINES  
Unified Multi-Purpose ID



CRN-0111-9758200-3



SURNAME  
**EGAR**  
GIVEN NAME  
**JOANNE**

MIDDLE NAME  
**LOPEZ**  
SEX  
**F** DATE OF BIRTH **1996/01/09**  
ADDRESS  
**1000 KAMPUTHAW EXT. JUANA  
OSMENA MARTINEZ CMPD.  
CAPITOL SITE CEBU CITY  
CEBU PHL 6000**

*JS*



Pag-IBIG *Plus*  
LOYALTY CARD



**JOANNE L. EGAR**

MID No **1211-9411-3891**



3\*1500\*1045\*003912





**MEMBER DATA RECORD**

**MEMBER INFORMATION**

Philhealth Identification Number (PIN) : 202507505270  
 Member Category : FORMAL ECONOMY  
 Sub-Category : PRIVATE  
 NHTS Coverage :  
 Effectivity Period :

**EGAR , JOANNE LOPEZ**

1000 JUANA OSMEÑA MARTINEZ CMPD  
 CAMPUHAW (POB.), CEBU CITY, CEBU 6000

Foreign Address : N/A  
 Sex : Female  
 Date of Birth : 01/09/1996  
 Place of Birth : BONGAO, TAWI-TAWI  
 Contact No.(Foreign) : N/A  
 (Local) : 09330473839  
 Civil Status : SINGLE  
 Tax Identification Number : 950859919

**EMPLOYER/ORGANIZED GROUP INFORMATION**

PhilHealth Number (PEN/POGN) : 012000042453  
 Name of Employer/Organized Group : SUPERYACHT ACADEMY IN ASIA AND THE PACIFIC CORP  
 Business Address : SUGBUTEL BLDG SERGIO OSMEÑA JR BLVD CARRETA, CEBU CITY, CEBU  
 Telephone Number : 032 3541491  
 Tax Identification Number : 009665757000

**DEPENDENT INFORMATION**

PIN	Surname	Given Name	Middle Name	Sex	Relation	Date of Birth
-----	---------	------------	-------------	-----	----------	---------------

\*\*\* NO DECLARED DEPENDENT/S \*\*\*

**Paalala:** Basahin ang nilalaman ng MDR. Kung may kulang o mali, dalhin agad ang kopya sa pinakamalapit na PhilHealth Office upang maiwasto. Ingatan ang inyong kopya ng MDR at huwag ibigay kahit kanino.

**Reminder:** Read the contents of the MDR. Should there be discrepancies, bring your copy to the nearest PhilHealth Office to amend or rectify error. Take good care of the MDR and do not hand it over to anybody.



REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF FINANCE  
BUREAU OF INTERNAL REVENUE

NAME: **EGAR, JOANNE LOPEZ**

TIN : 950-859-919

ADDRESS : **Sukuran St.**

**Bongao, Tawi-Tawi**

BIRTH DATE: **01-09-1996**

ISSUE DATE: **7-08, 2016**



  
SIGNATURE





# Certificate of Compensation Payment/Tax Withheld

BIR Form No.  
**2316**

For Compensation Payment With or Without Tax Withheld

July 2008 (ENCS)

Fill in all applicable spaces. Mark all appropriate boxes with an "X"

1 For the Year (YYYY) **2018**

2 For the Period  
From (MM/DD) **01 01** To (MM/DD) **12 31**

**Part I Employee Information**

3 Taxpayer Identification No. **950 859 919 0000**

4 Employee's Name (Last Name, First Name, Middle Name) **EGAR, JOANNE LOPEZ** 5 RDO Code **081**

6 Registered Address **JUANA OSMEÑA CAPITOL SITE, CEBU CITY** 6A Zip Code **6000**

6B **DATU HALUN STREET, BONGAO TAWI-TAWI** 7C Zip Code

6D Foreign Address 6E Zip Code

7 Date of Birth (MM/DD/YYYY) **0 1 0 9 1 9 9 6** 8 Telephone Number **0907-348-1409**

9 Exemption Status  
 Single  Married

9A Is the wife claiming the additional exemption for qualified dependent children?  
 Yes  No

10 Name of Qualified Dependent Children 11 Date of Birth (MM/DD/YYYY)

12 Statutory Minimum Wage rate per day **12**

13 Statutory Minimum Wage rate per month **13**

14  Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax

**Part IV-B Details of Compensation Income and Tax Withheld from Present Employer**

Amount	
<b>A. NON-TAXABLE/EXEMPT COMPENSATION INCOME</b>	
32 Basic Salary/ Statutory Minimum Wage Minimum Wage Earner (MWE)	32
33 Holiday Pay (MWE)	33
34 Overtime Pay (MWE)	34
35 Night Shift Differential (MWE)	35
36 Hazard Pay (MWE)	36
37 13th Month Pay and Other Benefits	37 <b>8,096.66</b>
38 De Minimis Benefits	38 <b>0.00</b>
39 SSS, GSIS, PHIC & Pag-ibig Contributions, & Union Dues (Employee share only)	39 <b>4,740.00</b>
40 Salaries & Other Forms of Compensation	40 <b>97,260.00</b>
41 Total Non-Taxable/Exempt Compensation Income	41 <b>110,096.66</b>
<b>B. TAXABLE COMPENSATION INCOME REGULAR</b>	
42 Basic Salary	42 <b>0.00</b>
43 Representation	43
44 Transportation	44
45 Cost of Living Allowance	45
46 Fixed Housing Allowance	46
47 Others (Specify)	47
47A	47A <b>0.00</b>
47B	47B

**Part II Employer Information (Present)**

15 Taxpayer Identification No. **009 665 757 0000**

16 Employer's Name **SUPERYACHT ACADEMY IN ASIA AND THE PACIFIC CORP.**

17 Registered Address **SUGBUTEL BLDG. OSMENA BLVD. BRGY.** 17A Zip Code **6000**

Main Employer  Secondary Employer

**Part III Employer Information (Previous)**

18 Taxpayer Identification No.

19 Employer's Name

20 Registered Address 20A Zip Code

**Part IV-A Summary**

21 Gross Compensation Income from Present Employer (Item 41 plus Item 55)	21	<b>110,096.66</b>
22 Less: Total Non-Taxable/Exempt (Item 41)	22	<b>110,096.66</b>
23 Taxable Compensation Income from Present Employer (Item 55)	23	<b>0.00</b>
24 Add: Taxable Compensation Income from Previous Employer	24	
25 Gross Taxable Compensation Income	25	<b>0.00</b>
26 Less: Total Exemptions	26	<b>0.00</b>
27 Less: Premium Paid on Health and/or Hospital Insurance (If applicable)	27	<b>0.00</b>
28 Net Taxable Compensation Income	28	<b>0.00</b>
29 Tax Due	29	<b>0.00</b>
30 Amount of Taxes Withheld		
30A Present Employer	30A	<b>0.00</b>
30B Previous Employer	30B	
31 Total Amount of Taxes Withheld As adjusted	31	<b>0.00</b>

**SUPPLEMENTARY**

48 Commission	48
49 Profit Sharing	49
50 Fees Including Director's Fees	50
51 Taxable 13th Month Pay and Other Benefits	51 <b>0.00</b>
52 Hazard Pay	52
53 Overtime Pay	53
54 Others (Specify)	54
54A	54A
54B	54B
55 Total Taxable Compensation Income	55 <b>0.00</b>

We declare, under the penalties of perjury, that this certificate has been made in good faith, verified by us, and to the best of our knowledge and belief, is true and correct pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof.

56 Present Employer/ Authorized Agent Signature Over Printed Name  
CONFORME: **MITCHEL ADVINCULA**  
CTC No. **1220 6096** Employee Signature Over Printed Name **JOANNE EGAR**  
of Employer: **1220 6096** Place of Issue **Cebu city**

Date Signed **0 1 3 0 2 0 1 9**  
Date of Issue **0 1 2 3 2 0 1 9** Amount Paid **135.00**

I declare, under the penalties of perjury, that the information herein stated are reported under BIR Form No. 1604CF which has been filed with the Bureau of Internal Revenue.

58 Present Employer/ Authorized Agent Signature Over Printed Name  
(Head of Accounting/ Finance/ Resources/ or Authorized Representative)  
**MITCHEL ADVINCULA**

I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Returns (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year, that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604CF filed by my employer to the BIR shall constitute as my income tax return, and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 had been filed pursuant to the provisions of BIR Form No. 3-2002, as amended.  
59 **JOANNE EGAR**  
Employee Signature Over Printed Name





Republic of the Philippines  
Department of Justice  
National Bureau of Investigation



17802504

This is to certify that the person whose name, picture, signature and thumbprint appearing below applied for NBI Clearance and the results is as follows.

NBI ID NO.  
E260AJIE69-R71033777

FAMILY NAME  
EGAR

MIDDLE NAME  
LOPEZ

ADDRESS  
1000 JUANA OSMENA EXT BRGY CAPITOL SITE CEBU CITY

DATE OF BIRTH  
January 09, 1996

CITIZENSHIP  
FILIPINO

PURPOSE  
MULTI-PURPOSE CLEARANCE

REMARKS  
NO RECORD ON FILE

VALID UNTIL  
March 05, 2021

FIRST NAME  
JOANNE

HUSBAND'S SURNAME

PLACE OF BIRTH  
BONGAO TAWI-TAWI

CIVIL STATUS  
SINGLE



SIGNATURE

GENDER  
FEMALE



Date Printed: Thursday, March 5, 2020 08:17 AM

Agency	R7	DATID	dupag
CASID	dupag	BIOID	dupag
O.R. No	E3B7UNR6	RECID	
O.R. Date	03/05/2020 8:15:10 AM	INTID	
DST PAID		PRTID	villarinn



E260AJIE69-R71033777

ERIC B. DISTOR  
NBI Director - OIC



Republic of the Philippines  
Department of Justice  
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**PERSONAL COPY**



E260AJIE69-R71033777

ERIC B. DISTOR  
NBI Director - OIC