

**Employee Static Information**

C.R.N.

SS Number **06-3948685-9**Date of Birth **06-20-1992**Member Name **VALLEJOS, GLENN JOHN  
ERQUILANG**

Date of Coverage

**Address & Contact Information****MEMBER DETAILS**

E-1 Flag Status : E-1 FILED  
Sex : MALE  
Reporting Date :  
Reporting ID :  
Latest ER ID :  
Latest ER Name :  
Claim Flag Status : NO CLAIM  
SS Number Status : SS NUMBER ACTIVE  
Transferred to (New SS  
Number) :  
Coverage Status : PRIOR REGISTRANT  
Change in Coverage Status : NO STATUS CHANGE  
Date of Loan Disqualification :  
SS Number Withdrawal  
Reason :  
Record Location : CEBU  
SMB PB Enrollment  
Information :

- MEMBER NOT YET ENROLLED IN THIS PROGRAM

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