CS Form No. 212										
PERSONAL DATA SHEET										
WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.										
	TO FILLING OUT THE PERSONAL DATA SHE and use separate sheet if necessary. Indicate			PDS FORM.	1. CS ID No.		(Do not fill	up. For CSC use only)		
I. PERSONAL INFORMATION										
2 SURNAME	CABABAG							7		
FIRST NAME	ANGELO		NAME EXTENSION (JR., SR) N/A							
MIDDLE NAME	BONTO					7 3	2 12	-		
3. DATE OF BIRTH		/* AT 27 (AT)		1						
(mm/dd/yyyy)	04/30/1995	16. CITIZENSHIP		☐ Filipino	☑ Filipino □ Dual Citizenship □ by birth □ by naturalization					
4. PLACE OF BIRTH	MANILA	If holder of dual cifizer	ifizenship,			Pls, indicate country:				
5. SEX	☑ Male ☐ Female	please indicate the de		Philippines				_		
6 CIVIL STATUS	☑ Single ☐ Married	17. RESIDENTIAL ADDRESS		N/A			N/A			
G CHE STATOS	☐ Widowed ☐ Separated	Paul and Author Wall Address State S	Hause/Black/Lat Na.			Street				
	☐ Other/s:	_	Si	N/A odivision/Village			VICTORY Barangay			
7. HEIGHT (m)	1.68 m			ABUYOG Cify/Municipality			Province Province			
8. WEIGHT (kg)	53 kg.	ZIP CODE				6510				
9. BLOOD TYPE	NIA	18. PERMANENT ADDRESS		N/A			N/A			
10. GSIS ID NO.	N/A	1	Ha	use/Block/Lat No N/A			Street VICTORY			
CONTO CONTRA DO SERVIDA		-	Se	ABUYOG			Barangay LEYTE			
11. PAG-IBIG ID NO. 12. PHILHEALTH NO.	121233205673	ZIP CODE	City/Municipality			6510	Province			
11. SSS NO.	0641742060	19. TELEPHONE NO.				N/A				
14. TIN NO.	352-841-163-00000	20. MOBILE NO.			0	9279334016				
15. AGENCY EMPLOYEE NO.	N/A	31 F 1444 ADDDCCC #44		20	anlacaba	abag21@gma	il com			
II. FAMILY BACKGROUND	NA	21. E-MAIL ADDRESS (if any)		ai	igelocaba	abagz i @gilia	II.COIII			
22. SPOUSE'S SURNAME	N/A		23. NAME of CHI	I DDEN AMito f	I name and fo	f s #1	DATE OF BIE	RTH (mm/dd/yyyy)		
FIRST NAME	- NA	NAME EXTENSION (JR., SR)	Za. IOME DI GIT				N/A			
MIDDLE NAME				N/A				N/A		
OCCUPATION										
EMPLOYER/BUSINESS NAME								-		
BUSINESS ADDRESS								el à		
E-112 J-15 E-102 - 122 -								-		
TELEPHONE NO.	2151512									
24. FATHER'S SURNAME	CABABAG	NAME EXTENSION (JR., SRJ. N/A								
FIRST NAME	DANILO	hase extension pin, any him			- 2		i di			
MIDDLE NAME	YARANON	00.000								
25. MOTHER'S MAIDEN NAME	MARY ANN MENDOZA	BONTO								
SURNAME	CABABAG									
FIRST NAME	MARY ANN									
MIDDLE NAME	BONTO				Continue on s	eparate sheet if nece	issary)			
III. EDUCATIONAL BACKGE	ROUND	1								
26. LEVEL	LEVEL NAME OF SCHOOL (Write in full)		VDEGREE/COURSE PERIOD OF AT		TTENDANCE Ta	HIGHEST LEVELI UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED		
ELEMENTARY	STA, FE STO. NIÑO ELEMENTARY SCHOOL	ELEMENTAR	Y	2001	2007	GRADUATED	2007	N/A		
SECONDARY	ABUYOG NATIONAL HIGHSCHOOL	нідняснооі	Ļ	2007	2012	GRADUATED	2012	N/A		
VOCATIONAL / TRADE COURSE	N/A	N/A		N/A	N/A	N/A	N/A	N/A		
COLLEGE	ABUYOG COMMUNITY COLLEGE	BACHELOR OF SCIE		2014	2018	GRADUATED	2018	CHED StuFAPs		
GRADUATE STUDIES	NIA	N/A		N/A	N/A	N/A	N/A	N/A		
SIGNATURE	(Continue on separate sheet if necessary) DATE 02/06/2024 CS FORM 212 (Revised 2017), Fage 1 of), Page 1 of 4					
7	. 7	•								





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Z7. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE CAREER SERVICE EXAMINATION (PROFESSIONAL)		RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT			LICENSE (if ap	plicable) Date o Validity	
		81.83%	03/26/2023	TACLOE	BAN CITY		N/A	N/A	
			-	1					
			-						
. WORK E	XPERIENCE		(Co.	ntinue on separate sheet	t if necessary)				
		t. Start from your recent	work) Description	of duties should b	e indicated in the attached	l Work Expe			
(mi	JSIVE DATES m/dd/yyyy)	POSITION TI (Write in full/Da not a			ENCY / OFFICE / COMPANY II/Do not abbreviate)	MONTHLY SALARY	SALARY/JOB/PAY GRADE (# applicable)& STEP (Format TO-07)	STATUS OF APPOINTMENT	GOVT SERVIC (Y/N)
From	To		_		Walanda and American Company of the		NCREMENT		- 13
08/16/2023	PRESENT	ENCODE		PHILIPPINE POSTAI		7,500.00	N/A	CONTRACTUAL	Y
08/10/2022	05/27/2023	JOBBERFUND CLE			DING CORPORATION ANCIS XAVIER CREDIT	9,750.00	N/A	REGULAR	N
12/01/2017	03/01/2018	INTERN			PERATIVE	N/A	N/A	INTERN	N
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			(Co	ntinue on separate sheel	t if necessary)				
SIGNA	TURE		$\sqrt{2}$	DATE	02/06/2024		CS FORM	212 (Revised 2017), P	age 2 of 4

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S								
29. NAME & ADDRESS OF ORGANIZATION (Wite in full)			INCLUSIVE DATES (mm/dd/yyyy) From To		POSITION / NATURE OF WORK		N / NATURE OF WORK	
N/A			N/A	N/A			N/A	
					-,		7	
•		2.0			-11			
				<u> </u>				
					-			
							-	
VII. LEARNING AND DEVELOPMENT (L&D) I		on separate s OGRAMS ATT						
(Start from the most recent L&D/training program and include		e last five (5) years	for Division Chie	/Executive/Manage	vial positions)			
30. TITLE OF LEARNING AND DEVELOPMENT INTE		INCLUSIVE DATES OF ATTENDANCE		MUMBER OF HOURS	Type of LD (Managerial/	CONDUCTED/SPONSCRED BY (Wilde in full)		
(Write in full)	M.	(mm/dd/yyyy) Fram Ta			Supervisory/ Technical/etc)			
N/A		N/A	N/A	N/A	N/A		N/A	
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		"			SI.			
	(Cont	inue on separate s	heet if necessary)					
VIII. OTHER INFORMATION								
31. SPECIAL SKILLS and HOBBIES	32 NON		in full)	3-3. (Write in full)				
N/A	N/A				NIA			
						-		
							al de la companya de	
	Cont	inue on separale s	heet if necessary)					
SIGNATURE CH S			DATE		02/06/2024		CS FORM 212 (Revised 2017), Page 3 of 4	





By a Have you ever been criminally charged before any court? WES NO IYES, give details.	34	Are you related by consanguinity or affinity to the appointing chief of bureau or office or to the person who has immediate Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Care	☐ YES ☑ Ni☐ YES ☑ Ni ☐ YES, give details:					
If YES, give details: Date Flicit: Status of Cases/s:	35.	a. Have you ever been found guilty of any administrative offer	nse?		NO			
any court or tribunal? If YES, give details: If YES, give details:		b. Have you been criminally charged before any court?		If YES, give details: Date Filed:				
dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector? 32 a. Have you ever been a candidate in a national or local election held within the last year (except Barrangy) election? 33 b. Have you resigned from the government service during the three (3)-month period before the last election to promoteleatively campaign for a national or local candidate? 34 b. Have you acquired the status of an immigrant or permanent resident of another country? 45 Pursuant for (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Wellstane Act of 2000 (RA 8872), please answer the following items: 4 Are you a member of any indigenous group? 5 Are you a person with disability? 4 REFERENCES (Person not estated by consequitive or attriby to applicant (reported) ARCHIE FERNANDEZ CHRISTINE MAY SUDARIO PALO, LEYTE OSROG, LEYTE OSROG, LEYTE OSROGO, LEYTE OSROGO, LEYTE OSROGO, LEYTE OSROGO attribute and the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head of Justificate depresentative to revilyhelidate the contents stated therein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal caseds against me. 5 Government based (I) PHILIPPINE DEMTRICATION CARD (Discusse) 10 Discusse Prespect Lex SSS PRICES (PERSON CARD (Synthistic label)) 11 PERSON Administrative/criminal caseds against me. 12 Jesus details: 13 NO IYES, give details: 14 NO IYES, give details: 15 NO IYES, give details: 16 NO IYES, give details: 17 NO IYES, give details: 18 NO IYES, give details: 18 NO IYES, give details: 19 NO IYES, give details: 19 NO IYES, give details: 20 NO IYES, give details: 21 NO IYES, give details: 22 NO IYES, give details: 23 NO IYES, give details: 24 NO IYES, give details: 24 NO IYES, give details: 25 NO IYES, give	36		y law, decree, ordinance or regulation by					
Barangay election)? D. Have you resigned from the government service during the three (3)-month period before the last election to promotelactively campaign for a national or local candidate? 32 Have you acquired the status of an immigrant or permanent resident of another country? 44 Pursuant to: (a) indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Wellare Act of 2000 (RA 8972), please answer the following items: 4 Are you a member of any indigenous group? 4 Are you a person with disability? 4 Are you a person with disability? 4 Are you a solo parent? 4 REFERENCES (Person not related by consequidity or affinity to applicant Appointhes) NAME ARCHIE FERNANDEZ CHRISTINE MAY SUDARIO PALO, LEYTE ORNOC, LEYTE O8868699992 MARY GRACE AGUILOS CARIGARA, LEYTE O8868699992 MARY GRACE AGUILOS CARIGARA, LEYTE O8868699992 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorized representative to werifylvalidate the convents stated herein. I agree that any misrepresentation made in this document and lis attachments shall cause the filing of administrative/criminal case's against me. FOVERMENT OF THE PRINCE DESTIFICATION CARD Disconsidered ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government Insued ID a Princept Case SSE PRC, Control Lambors. Government I	37.	dropped from the rolls, dismissal, termination, end of term, fin in the public or private sector?	ished contract or phased out (abolition)					
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate? 39. Have you acquired the status of an immigrant or permanent resident of another country? 40. Pursuant to: (a) indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? b. Are you a solo parent? c. Are you a solo parent? d. If YES, please specify. d. YES in NO if YES, please specify.	38.		tion held within the last year (except		☑ NO			
### Approximation of the properties and the properties of the prop				□ YES ☑ NO				
### Are you a member of any indigenous group? ### Are you a member of any indigenous group? ### Are you a person with disability? ### Are you a person with disability? ### Are you a solo parent? ### Are you a solo parent? ### Appears a solo parent?	39.	Have you acquired the status of an immigrant or permanent r						
Are you a person with disability? c. Are you a person with disability? d. REFERENCES (Person not related by consanguinty or affinity to applicant Importance) NAME ARDRESS TEL NO. CHRISTINE MAY SUDARIO PALO, LEYTE O9868909092 ARCHIE FERNANDEZ ORMOC, LEYTE O9868909092 ARCHIE FERNANDEZ ORMOC, LEYTE O9868909092 ARCHIE FERNANDEZ ORMOC, LEYTE O9868909092 ARY GRACE AGUILOS CARIGARA, LEYTE O9868909092 ARY GRACE AGUILOS CARIGARA, LEYTE O9868909092 The agency head / authorized representative to verifylvalidate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID a Person Administrative of the Republic of the Philippines. I authorize the agency head / authorized representative to verifylvalidate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID a Person Administrative of the Philippines. I authorize the agency head of susuance of the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head of susuance of the provisions of the Republic of the Philippines. I authorize the agency head of susuance of the provisions of the Republic of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of the provisions of the Republic of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of susuance of the Philippines. I authorize the agency head of the Philippines. I authorize the agency head of the Philippines. I authorize the agency h	40.							
Are you a person with disability? Are you a solo parent? Are you a solo parent. And If yes, please specty ID No. If YES, please	a	The transfer and the contract of the first transfer and transfer	blease answer the following items.	□ YES	E NO			
Are you a solo parent? YES Please specify ID No: YES Zh NO Zh NHO Zh	h	Are you a person with disability?		If YES, please specify:				
ALL REFERENCES (Person not related by consanguinity or affinity to applicant /appointee) NAME ADDRESS TEL NO. CHRISTINE MAY SUDARIO PALO, LEYTE O9888909092 ARCHIE FERNANDEZ ORMOC, LEYTE O9888909092 ARCHIE FERNANDEZ ORMOC, LEYTE O9654131822 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippinal Lauthorizet agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID @ aParaport CSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Data of Issuance Government Issued ID: PHILIPPINE IDENTIFICATION CARD IDA. IDA. CARD SWORN to before me this SUBSCRIBED AND SWORN to before me this affiant exhibiting his/her validy issued government ID as indicated above. Person Administering Oath		Are you a person with disability?						
CHRISTINE MAY SUDARIO PALO, LEYTE O9386170224 ARCHIE FERNANDEZ ORMOC, LEYTE O9686909092 MARY GRACE AGUILOS CARIGARA, LEYTE O9654131822 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID: PHILIPPINE IDENTIFICATION CARD IDAIconsePassport No: 3745-6390-5924-8503 Date/Piace of Issuance: 06/24/2022 ABUYOG, LEYTE SUBSCRIBED AND SWORN to before me this	C.	Are you a solo parent?						
CHRISTINE MAY SUDARIO PALO, LEYTE O9386170224 ARCHIE FERNANDEZ ORMOC, LEYTE O9686909092 MARY GRACE AGUILOS CARIGARA, LEYTE O9654131822 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filling of administrative/criminal case/s against me. Government Issued ID @ Person Administrative/Criminal case/s Government Issued ID: PHILIPPINE IDENTIFICATION CARD IDALicense/Passport No: 3745-8390-5928-8503 Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE Government Issued ID: PHILIPPINE IDENTIFICATION CARD IDALicense/Passport No: 3745-8390-5928-8503 Signature (Sign inside the box) C20/06/2024 Date Accomplished Right Thumbmark Person Administering Oath	41.	REFERENCES (Person not related by consanguinity or affinity to applicant /	appointee)					
ARCHIE FERNANDEZ MARY GRACE AGUILOS CARIGARA, LEYTE 09654131822 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID @ a Person GSIS, SSS, PRC, Drivers License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILIPPINE IDENTIFICATION CARD ID/License/Passport No: 3745-8390-5926-8503 Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE SUBSCRIBED AND SWORN to before me this , affant exhibiting his/her validy issued government ID as indicated above. Person Administering Oath		NAME	ADDRESS	TEL NO.				
MARY GRACE AGUILOS CARIGARA, LEYTE 09654131822 42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID @ a Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILIPPINE IDENTIFICATION CARD ID/License/Passport No.: 3745-8390-5928-8503 Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE SUBSCRIBED AND SWORN to before me this		CHRISTINE MAY SUDARIO	PALO, LEYTE	09386170224				
42 I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID @ Person of CSIS SSS PRC, Driver's License, etc.)		ARCHIE FERNANDEZ	ORMOC, LEYTE	09686909092	1			
statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me. Government Issued ID @aPassport, GSIS, SSS, PRC, Deiver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILIPPINE IDENTIFICATION CARD Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE Date Accomplished Right Thumbmark		MARY GRACE AGUILOS	CARIGARA, LEYTE	09654131822				
PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHILIPPINE IDENTIFICATION CARD ID/License/Passport No.: 3745-8390-5926-8503 Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE SUBSCRIBED AND SWORN to before me this	42	statement pursuant to the provisions of pertinent laws, rules the agency head / authorized representative to verify/misrepresentation made in this document and its attachment	and regulations of the Republic of the Phil validate the contents stated herein. I	ippines. I authorize agree that any	PHOTO PHOTO			
Covernment Issued ID: PHILIPPINE IDENTIFICATION CARD IDALicense/Passport No.: 3745-8390-5926-8503 Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE SUBSCRIBED AND SWORN to before me this			A42					
Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE Date Accomplished SUBSCRIBED AND SWORN to before me this	I F		JP 0					
Date/Place of Issuance: 06/24/2022 ABUYOG, LEYTE Date Accomplished Right Thumbmark SUBSCRIBED AND SWORN to before me this	ID	/Licanse/Passport No.: 3745-8390-5926-8503	Signature (Sign inside the box	x)				
Person Administering Oath	Data/Diago of Jeeugago: 06/24/2022 ARITYOG LEVTE				Right Thumbmark			
Person Administering Oath	ř	SUBSCRIPED AND SWOOM to before me thin	off ant outsideling	o biobos volido issued so	amment ID on indicated above			
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FOLLOWS ETS [L'ANDER STILT]. L'OBRA D					CS FORM 212 (Revised 2017), Page 4 of 4			

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.

- The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.
- Duration: August 16, 2023 present
- · Position: Encoder
- Name of Office/Unit: Tacloban Sub Distribution Center
- Immediate Supervisor: Renato A. Nacionales
- Name of Agency/Organization and Location: Philippine Postal Corporation/Tacloban City
 - List of Accomplishments and Contributions (if any)
 - Submitted monthly fuel consumption reports.
 - Summary of Actual Duties
 - o Encode mail data and other items due for encoding.
 - Assist in the processing of mails for dispatch and delivery including sorting, backstamping, and other related functions.
- Duration: August 10, 2022 May 27, 2023
- · Position: Jobber Fund Clerk
- · Name of Office/Unit: Finance Department
- · Immediate Supervisor: Archie Fernadez
- Name of Agency/Organization and Location: Onyata Trading Corporation, Tacloban City
 - · List of Accomplishments and Contributions (if any)
 - Submitted reports (incident) on issues concerning sellers (discrepancies on sales, inventory shortages/overages etc.)
 - Submitted reports on actual sales/remittance.
 - Summary of Actual Duties
 - Conduct actual inventory count in medium and small units, and reconciling sales based on remaining inventory versus remittance on a weekly basis or as needed.
 - Provide OSB Clerk (Order, Shipping and Billing) the final loadable amount of the seller based on the jobber reconciliation done.
 - Ensure the completeness and correctness of supporting documents used for the reconciliation.
 - Ensure the validity of deductions made to sales.
 - o Checks Weekly Expense Report (WER) of sellers.
 - Daily Customer Store Confirmation via Actual Visit or Telephone Back Check.
 - Weekly jobber fund reconciliation.

(Signature over Printed Name of Employee/Applicant)

Date: 02-06-2024

