CS Form	No.	21
Revised 20	117	

SIGNATURE

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 READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM. 1. CS ID No. (Do not fill up. For CSC use only) Print legibly. Tick appropriate boxes [ ] ) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE. 2. SURNAME Esquibel NAME EXTENSION (JR., SR) FIRST NAME Mary Abegail MIDDLE NAME Rebigan 3. DATE OF BIRTH 12/19/1998 16. CITIZENSHIP ✓ Filipino Dual Citizenship by birth by naturalization 4. PLACE OF BIRTH WLPH Baybay City, Leyte If holder of dual citizenship, Pls. indicate country: please indicate the details. ✓ Female 5. SEX ☐ Male ✓ Single Married 17. RESIDENTIAL ADDRESS A. Bonifacio St 6 CIVIL STATUS ■ Widowed House/Block/Lot No. Street Separated Sto. Niño Village, Zone 1 Other/s: Subdivision/Village Barangay Baybay City Leyte 7. HEIGHT (m) 5"4" City/Municipality Province 8 WEIGHT (kg) 60 ZIP CODE 18. PERMANENT ADDRESS A. Bonifacio St. 9 BLOOD TYPE 0 House/Block/Lot No. Street Sto. Niño Village, Zone 1 10. GSIS ID NO. N/A Subdivision/Village Barangay Baybay City 11. PAG-IBIG ID NO. Levte 12-125799510-1 City/Municipality Province 02-253727856-4 12 PHILHEALTH NO ZIP CODE 6521 13. SSS NO. 06-4189985-8 19. TELEPHONE NO. N/A 14. TIN NO. 749-127-491 20 MOBILE NO 09559175830 15. AGENCY EMPLOYEE NO NIA 21. E-MAIL ADDRESS (if any) maryabegail1219@gmail.com 22 SPOUSE'S SURNAME NA 23. NAME of CHILDREN (Write full name and list all) DATE OF BIRTH (mm/dd/yyyy) NAME EXTENSION (JR., SR) FIRST NAME N/A N/A N/A MIDDLE NAME NA N/A NIA OCCUPATION NIA N/A N/A EMPLOYER/BUSINESS NAME NA N/A N/A **BUSINESS ADDRESS** N/A N/A N/A TELEPHONE NO NA N/A N/A 24. FATHER'S SURNAME Esquibel N/A N/A NAME EXTENSION (JR., SR) Anthony FIRST NAME N/A N/A MIDDLE NAME Buta N/A N/A 25. MOTHER'S MAIDEN NAME N/A N/A SURNAME Rebigan N/A N/A FIRST NAME Melanie N/A N/A MIDDLE NAME Labrador (Continue on separate sheet if necessary) SCHOLARSHIP PERIOD OF ATTENDANCE HIGHEST LEVEL NAME OF SCHOOL BASIC EDUCATION/DEGREE/COURSE ACADEMIC HONORS YEAR LEVEL (Write in full) GRADUATED (Write in full) (if not graduated) RECEIVED From To ELEMENTARY Baybay i Central School Elementary 2005 2011 Graduate 2011 N/A Franciscan College of the Immaculate SECONDARY **High School** 2011 2015 Graduate 2015 N/A Conception VOCATIONAL / N/A N/A N/A N/A N/A N/A N/A TRADE COURSE COLLEGE Saint Joseph College **Bachelor of Science in Accountancy** 2015 2019 Graduate 2019 CHED GRADUATE STUDIES N/A N/A N/A N/A N/A N/A N/A

July 31, 2025

DATE

CAREE	R SERVICE/ RA 1080	(BOARD/BAR) UNDER	RATING	DATE OF				LICENSE (if a	pplicable)
BAR	SPECIAL LAWS/ ANGAY ELIGIBILITY /	CES/ CSEE / DRIVER'S LICENSE	(If Applicable)	EXAMINATION / CONFERMENT	PLACE OF EXAMINA	TION / CONFE	RMENT	NUMBER	Date o
	areer Service Pro		81.38	8/4/2019	Saint Joseph College, Maasin City, Southern Leyte		y, Southern	N/A	N/A
WORK =	XPERIENCE		(Co)	ntinue on separate sheet	if necessary)				
lude priva INCLUS	te employment SIVE DATES				e indicated in the attach		SALARY/ JOB/ PAY		GOV
From	To	POSITION TO (Write in full/Do not		DEPARTMENT / AG (Write in ful	ENCY / OFFICE / COMPANY I/Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable)& STEP (Format "00-0")/ INCREMENT	STATUS OF APPOINTMENT	SERVIO (Y/ N
/4/2019	2/1/2025	Branch Account	ing Clerk	DES Marketing	g, Inc Baybay Multi	P12,425	N/A	Permanent	No
	TURE	GAGI		ntinue on separate sheet	if necessary) DATE			1, 2025	

29. NAME & ADDRESS OF (Write in			INCLUSIVE DATES (mm/dd/yyyy) From To		NUMBER OF HOURS	POSITION / NATURE OF WORK	
V/A			N/A	N/A	N/A	N/A	
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VII. LEARN	ING AND DEVELOPMENT (L&I	( <mark>(Co</mark> D) INTERVENTIONS/TRAINING I	ntinue on separate PROGRAMS A		<b>y</b> )		
			INCLUSIV	E DATES OF		Type of LD	COMPLIATED ARCHIOCOS
TITL	E OF LEARNING AND DEVELOPMENT IN (Write in f		(mm/c	id/yyyy)	NUMBER OF HOURS	( Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
National Cartin	icate III in Bookkeeping		From 5/22/2025	To 5/21/2030	N/A		Technical Education and Skills Development
-uoonal Certif	и п вооккеерінд		JIZZIZUZ5	JIZ1/2030	NIA	Technical	Authority
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VIII. OTHE	R INFORMATION	(Cc	ontinue on separate	areat il riecessa	11		
31.	SPECIAL SKILLS and HOBBIES	32. NO	N-ACADEMIC DIST	INCTIONS / RECO	OGNITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
Coll	lecting Stationery Supplies		N	A			N/A
Makir	ng Spreads for Junk Journal						
			erryangs dipakanan kalam) ayan maraytak aban	Terroria septembro de la composición de			
angantarahan termanakan dari sa							
of the San Managemeter Asset			***************************************				
945 V. P. 18 W. 19					•		
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	SIGNATURE	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			The second secon	ATE	July 31, 2025

	e person who has immedia	ng or recommending authority, or to the te supervision over you in the Office,	,				
a. within the third degree?		YES	✓ NO				
b. within the fourth degree (for	Local Government Unit - Ca	YES	☑ NO				
		If YES, give detai	IS:				
35. a. Have you ever been found g	uilty of any administrative o	ffense?	☐ YES	☑ NO			
		If YES, give details:					
b. Have you been criminally charged before any court?			☐ YES ☑ NO If YES, give details:				
		Date Filed: Status of Case/s:					
36. Have you ever been convicted	of any crime or violation of	any law, decree, ordinance or regulation	YES	✓ NO			
by any court or tribunal?			If YES, give details:				
37. Have you ever been separated			☐ YES	✓ NO			
out (abolition) in the public or p	rivate sector?	end of term, finished contract or phased	If YES, give detai				
38. a. Have you ever been a candid Barangay election)?	date in a national or local el	YES If YES, give deta	☑ NO ···································				
<ul> <li>b. Have you resigned from the election to promote/actively car</li> </ul>		☐ YES ☑ NO If YES, give details:					
39. Have you acquired the status o	f an immigrant or permaner	nt resident of another country?	☐ YES ☑ NO				
			If YES, give detai	ls (country):			
		agna Carta for Disabled Persons (RA					
a. Are you a member of any indige		), please answer the following items:	□ vcc	[] NO			
		and the second second	YES If YES, please specif	✓ NO fy:			
b. Are you a person with disability	7		☐ YES ☑ NO If YES, please specify ID No:				
c. Are you a solo parent?		☐ YES ☑ NO If YES, please specify ID No:					
41. REFERENCES (Person not related by	consanguinity or affinity to applica	ant /appointee)					
NAME		ADDRESS	TEL. NO.				
Mercidita M. C	Cellona	A. Mabini St., Zone 1, Baybay City, Leyte	0926-083-4772				
Rex A. Gonz	zaga	Brgy. San Isidro, Baybay City, Leyte	0906-736-9774	1 Can 2			
Elmer P. D		A. Mabini St., Zone 1, Baybay City, Leyte	0956-199-5506				
complete statement pursuant Philippines. I authorize the ac	to the provisions of pertingency head/authorized repentation made in this do	d this Personal Data Sheet which is a tr nent laws, rules and regulations of the I resentative to verify/validate the contents cument and its attachments shall caus	Republic of the stated herein.				
Government Issued ID (i.e.Passport, GSIS, PLEASE INDICATE ID Number and D		( , , , , , , , , , , , , , , , , , , ,	0				
Government Issued ID: Unified Multi-	Purpose ID	y ag mu	(				
ID/License/Passport No.: 0111-9347134	l-1	Signature (Sign inside the br	nx)				
Date/Place of Issuance: Maasin City,	Southern Leyte	July 31, 2025 Date Accomplished		Right Thumbmark			
SUBSCRIBED AND SWORM	I to before me this	, affiant exhibiting	ng his/her validly issued	government ID as indicated above.			
	Γ						
		Person Administering Oat	n				

## **WORK EXPERIENCE SHEET**

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

- 2. 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: September 4, 2019 February 1, 2025
- · Position: Branch Accounting Clerk
- Name of Office/Unit: DES Marketing, Inc. Baybay Multi
- Immediate Supervisor: Recapel C. Arevalo
- Name of Agency/Organization and Location: DES Marketing, Inc., Baybay City, Leyte
  - List of Accomplishments and Contributions (if any)
  - Summary of Actual Duties
    - Responsible for the Branch Monthly Accounting Reports; the said report includes Trial Balance, Bank Reconciliation, Old Inventory, Sales and Collection Report, Expense Summary, Expense Report, Properties & Equipment Report, Leasehold Improvement Reports, Schedule of Other Assets, Office Supplies Inventory, Schedule of Other Liabilities, and Accrued Expense Summary. The said report is prepared by using Microsoft Excel;
    - Responsible for monitoring branch' monthly expenses; reviewing branch' cash disbursement; monitoring and reviewing branch employee's liquidation statements, securing approval to liquidate and journalizing the said transactions using the doubleentry bookkeeping;
    - Responsible for written communications to Head Office such as Request Letters for Approval, Request Letters for Post-Approval, Explanation Letters, Employee Request Letters, Requests for Consideration and to follow-up updates:
    - Responsible for filing Employee Records, HO Memorandum and General Memo and disseminating memos to employees;
    - Responsible for disseminating branch notice for monthly meeting, posting early closure for the meeting and keep records of minutes;
    - Responsible for making the branch office supplies budget for the whole year and monitoring and conducting actual physical count of branch office supplies and FFE's (furniture, fixture and equipment), purchasing office supplies and controlling the usage of supplies
    - Responsible for reviewing employee attendance record for payroll report

MARY ABECAIL (R) ESQUIBEL
(Signature over Printed Name
of Employee/Applicant)

Date: 7/31/2025