CS Rorm No. 212		Vice was						
Revised 2017	PERSOI	NAL DAT	A SH	FFT				
WARNING: Any misrepresenta concerned.	tion made in the Personal Data Sheet and the	Work Experience Sheet sha	all cause the fil	ing of admin	istrative/cri	minal case/s aga	nst the perso	on I
	TO FILLING OUT THE PERSONAL DATA SHE (and use separate sheet if necessary, Indicate N			-	CS ID No		Do not fill up. For	Céc une anhá
1 A Tio	ON	art in not approache. Be not y	OBINEVIA (C.		CONTRACT		oo hot till up. For	CSC use only)
2 SURNAME	PAG-ONG							APLEASURE DESCRIPTION
FIRST NAME	ELNA				I	IAME EXTENSION	(JR., SR)	N/A
MIDDLE NAME	BLANKER							
3. DATE OF BIRTH	02/12/2000	16 CITIZENSHIP						
(mm/dd/yyyy)	02122000	10 CHIZENSHIP		✓ Filip	ino [Dual Citizensh		
4. PLACE OF BIRTH	SITIO GUINDUHAAN WAGUE LEYTE,	If holder of dual citize	nship,			by birth [Pls. indicate co	by naturaliz	zation
5 SEX	LEYTE Male Female	please indicate the de		Philippines				-
		17 RESIDENTIAL ADDRESS	l House	se/Block/Lot No.	F Novice was at severe residence of the		Street	
6 CIVIL STATUS	✓ Single	IT RESIDENTIAL ADDRESS	Hous	N/A		CC	NSUEGRA	
	Other/s:	h - a manda ama	Sub	division/Village			Barangay LEYTE	
7 HEIGHT (m)	1.4		Cit	y/Municipality			Province	
8 WEIGHT (kg)	75	ZIP CODE	6533					
9 BLOOD TYPE	A	18 PERMANENT ADDRESS	Hous	se/Block/I of No			Street	-
10. GSIS ID NO	N/A		Sub	all for division Village		cc	NSUEGRA Barangay	
11. PAG-IBIG ID NO.	N/A			LEYTE ty/Municipality		P	Province	
12. PHILHEALTH NO		11 14 14 14 14 14						
13. SSS NO.	N/A	ZIP CODE	6533					
14 TIN NO.		19 TELEPHONE NO	N/A					
	657-504-358-00000	20 MOBILE NO	0906-781-825	i3 				
15. AGENCY EMPLOYEE NO.	N/A	21 E-MAIL ADDRESS (if any)		elnablan	kerpagor	gbabe02@g	mail.com	
		er hanne zu dem eine eine eine eine eine zu de eine eine eine eine eine eine eine e					AND CARE OF	community of the page
22 SPOUSE'S SURNAME	N/A	NAME EXTENSION (JR , SR)NIA	23. NAME of CH	ILDREN (Write	full name and	list all)	DATE OF BIRTH	H (mm/dd/yyyy)
FIRST NAME	N/A	INAME EXTENSION (SK., SK)NA	N/A				N/A	
MIDDLE NAME	N/A							
OCCUPATION	N/A							
EMPLOYER/BUSINESS NAME	N/A		-					
BUSINESS ADDRESS	N/A						-	
TELEPHONE NO	N/A			-			- 11 -	
24. FATHER'S SURNAME	PAG-ONG							
FIRST NAME	JOEL	NAME EXTENSION (JR., SR)						
MIDDLE NAME	DACLITAN							
25 MOTHER'S MAIDEN NAME	JENNA DOLLER BLANKER							
SURNAME	PAG-ONG RA.							
FIRST NAME	JENNA							
MIDDLE NAME	BUNNER &			(Co	ntinue on sej	parate sheet if nece	isary)	
III. EDUCATIONAL BACKG								
26	NAME OF SCHOOL	BASIC EDUCATION/DEGR	EE/COLIBCE	PERIOD OF A	ATTENDANCE	HIGHEST LEVEL/		SCHOLARSHIP/
LEVEL	(Write in full)	(Write in full)	EE/COURSE			UNITS EARNED (if not graduated)	YEAR GRADUATED	
ELEMENTARY	CONSUEGRA ELEMENTARY SCHOOL	ELEMENTARY GRA	ADUATE	From	To 2049	CDADUATED	0040	RECEIVED
	JUAN V. DELANTAR NATIONAL HIGH	SENIOR HIGH SCHOOL		2008	2013	GRADUATED	2013	HONOR
SECONDARY VOCATIONAL /	SCHOOL	(GENERAL ACAE		2013	2019	GRADUATED	2019	HONOR
TRADE COURSE	N/A	N/A	OND - Di-	N/A	N/A	N/A	N/A	N/A
COLLEGE	VISAYAS STATE UNIVERSITY- VILLABA	BACHELOR OF SEC EDUCATION MA.		2019	2023	GRADUATED	2023	CUM LAUDE & TES GRANTEE
COLLEGE	N/A	N/A		N/A	N/A	N/A	N/A	N/A
	(C	ontinue on separate sheet if ne	cessary)					
SIGNATURE	poor too lury			DA	TE.	Fe	bruary 27, 202	5

N. CIVIL	SERVICE ELI	GIBILITY			The second second second			L HOSTHOS II	
27 CAR	REER SERVICE/ RA	A 1080 (BOARD/ BAR) UNDER AWS/ CES/ CSEE	RATING	DATE OF EXAMINATION /	PLACE OF EXAMIN	ATION / CONFI	ERMENT	LICENSE (if a	Date of
	BARANGAY ELIGIB	ILITY / DRIVER'S LICENSE	(if Applicable)	CONFERMENT				-	Validity
PROF	ESSIONAL IDE (PROFESSION	ENTIFICATION CARD IAL TEACHER)	85.2	MARCH 24, 2024	TACLO	BAN CITY		2257991	02/12/2027
		ELIGIBILITY (PD 907)	GRANTED	APRIL 24, 2024	csc	RO VIII		100108240537	N/A
				NOTHING FOLL	OWS				
					= =				
			-						

			(Col	ntinue on sep <mark>arat</mark> e sheet	ir necessary)				
							SALARY/ JOB/ PAY	200	GOVT
	.USIVE DATES nm/dd/yyyy) To	POSITION TI (Write in full/Do not			NCY / OFFICE / COMPANY /Do not abbreviate)	MONTHLY SALARY	GRADE (if applicable) & STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	SERVICE (Y/N)
09/30/2024	10/30/2024	2024 FLEMMS (FUNCTIO EDUCATION, AND MASS ENUMERAT	MEDIA SURVEY)	PHILIPPINE STATIS	TICS AUTHORITY LEYTE			CONTRACT OF SERVICE	YES
08/07/2024	09/30/2024	2024 POPCEN-CBMS (CENSU COMMUNITY-BASED MON	S OF POPULATION -	PHILIPPINE STATIS	TICS AUTHORITY LEYTE			CONTRACT OF SERVICE	YES
		ENUMERAT		***NOTHING FOLLO	WS***				
					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
						= 1			
					X				
					1	= h = =	-		
							19.0		
							=		
							F-17		
		Λ	(Conti)	nue on separate sheet if i					
SIGNA	TURE	pagent though	mer		DATE	-	FERUARY 27, 20	ORM 212 (Revised 2017)). Page 2 of 4

	SS OF ORGANIZATION		IVE DATES (dd/yyyy)	NUMBER OF HOURS	1.194	POSITION AND THE OF MOSIC
(W)	Ne in rull)	From	To	- Monitor or Hours	A SALANCES	POSITION / NATURE OF WORK
N/	A	N/A	N/A	N/A	k	N/A
	(Co.	ntinue on separate	sheet if necessar	0		
	And a second	CONTRACTOR OF SECOND		NEW THE BANKS	PARTY ENGLISHED	CONTRACTOR SOLVER
30. TITLE OF LEARNING AND DEVELOPMEN	IT INTERVENTIONS/TRAINING PROGRAMS		DATES OF		Type of LD (Managerial/	CONDUCTED/ SPONSORED BY
(Write	e in full)	(mm/c	ld/yyyy)	NUMBER OF HOURS	(managenal/ Supervisory/ Technical/etc)	(Write in full)
2024 FLEMMS (FUNCTIONAL LITERACY, ED THIRD LEVEL	DUCATION, AND MASS MEDIA SURVEY)	99/23/2024	09/27/2024	40.0	TECHNICAL	PHILIPPINE STATISTICS AUTHORITY LEYTE
2024 POPCEN -CBMS (CENSUS OF POPULAT SYSTE	TION - COMMUNITY-BASED MONITORING	08/07/2024	12/7/2024	40.0	TECHNICAL	PHILIPPINE STATISTICS AUTHORITY LEYTE
STUDENT LEADERS OF TODAY, NA		08/04/2022	09/04/2022	16.0	TECHNICAL	UNIVERSITY SUPREME STUDENT COUNCIL OF
1st VSU - VILLABA LEAD	ERSHIP CONGRESS	11/29/2021	11/29/2921	4.0	TECHNICAL	VISAYAS STATE UNIVERSITY VILLABA COLLEGE OF TEACHER EDUCATION, ANTO AND SCIENCES SUPREME STUDENT COUNCIL OF VISAYAS STATE UNIVERSITY
		NOTHING FO	DLLOWS			VILLABA
		Γ	I	1 02 1		

Piler - Lo Ar						
- Law consistency of the law consistency of t						
APPENDING TEXTS OF THE PERSON	,				y	
				1 10 11		
	(Conti	inue on separate s	heet if necessary)			
OTHER INFORMATION			Mark.			
SPECIAL SKILLS and HOBBIES	32. NON-A	ACADEMIC DISTING		IITION		33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
MATHEMATICALLY INCLINED		LEADERSHIP	AWARD			TEACHERS EMPOWERMENT ASSOCIATION OF
	**	*NOTHING FO	LLOWS***			MATHEMATICS (TEAM)
			-			
SIGNATURE	Contin	nue on separate si	neet if necessary)			
SIGNATURE	tolough haby one			DA	ΤE	FERUARY 27, 2025 CS FORM 212 (Revised 2017), Page 3 of 4
	1 /					COLOUR ETT BIOLING TOLLY LENGT ON A

24 4 14 14 17 17 17 17 17 17 17 17 17 17 17 17 17	ting or recommending outhority as to the		
34. Are you related by consanguinity or affinity to the appoin	ling or recommending authority, or to the		-
chief of bureau or office or to the person who has immed	iate supervision over you in the Office,		
Bureau or Department where you will be apppointed,			
a. within the third degree?		☐ YES	✓ NO
b. within the fourth degree (for Local Government Unit - 0	Career Employees)?	☐ YES	✓ NO
		If YES, give detail	
35. a. Have you ever been found guilty of any administrative	offense?	☐ YES	✓ NO
		If YES, give detail	S:
1			
1			
b. Have you been criminally charged before any court?		YES	✓ NO
b. Have you been diffillially dialiged belofe any county		If YES, give detail	
		Date Filed:	_
and the second of the second o		Status of Case/s:	
36. Have you ever been convicted of any crime or violation of	f any law, decree, ordinance or regulation by	□ vrc	✓ NO
any court or tribunal?	YES If YES, give detail:		
	II 125, give details.		
37. Have you ever been separated from the service in any of	the following modes: resignation		☑ NO
retirement, dropped from the rolls, dismissal, termination,		YES If YES, give details	S:
(abolition) in the public or private sector?	2.12 37 terring minorited corne dot of pridood out	I STUDIED SUPPL	EMENTAL COURSE FOR EDUCATION
38. a. Have you ever been a candidate in a national or local	election held within the last year (except	YES	✓ NO
Barangay election)?		If YES, give deta	
b. Have you resigned from the government service during	g the three (3)-month period before the last	YES	✓ NO
election to promote/actively campaign for a national or loc	cal candidate?	If YES, give deta	IIS:
39. Have you acquired the status of an immigrant or permane	ent resident of another country?		
39. Have you acquired the status of an immigrant of permane		YES give detail	NO NO
*		If YES, give details	S (country).
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) N	Magna Carta for Disabled Persons (RA		
7277); and (c) Solo Parents Welfare Act of 2000 (RA 897	2), please answer the following items:	-	
(LIT), and (0) color arente frontier for or 2000 (10100)	-/1 [
			Lalano
a. Are you a member of any indigenous group?		If VES places enecif	v. V NO
		If YES, please specif	y:
		☐ YES	y:
Are you a member of any indigenous group?		YES If YES, please specif	y:
Are you a member of any indigenous group?Are you a person with disability?		YES If YES, please specif	y:
a. Are you a member of any indigenous group? b. Are you a person with disability?		☐ YES	y:
Are you a member of any indigenous group? Are you a person with disability? Are you a solo parent?		YES If YES, please specif	y:
Are you a member of any indigenous group?Are you a person with disability?	cant /appointee)	YES If YES, please specif	y:
 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic 		YES If YES, please specif	y:
a. Are you a member of any indigenous group?b. Are you a person with disability?c. Are you a solo parent?	ADDRESS	YES If YES, please specif YES If YES, please specif TEL. NO.	y:
 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME 		YES If YES, please specif YES If YES, please specif	y:
 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic 	ADDRESS BRGY. SILAD VILLABA, LEYTE	YES If YES, please specif YES If YES, please specif TEL. NO. N/A	y:
 a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME 	ADDRESS	YES If YES, please specif YES If YES, please specif TEL. NO.	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE	TEL NO. N/A	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN	TEL. NO. N/A N/A	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a tr	TEL. NO. N/A N/A N/A ue, correct and	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the	TEL. NO. N/A N/A N/A ue, correct and Republic of the	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of period of the provisions of period of the provision of period of the period of the provision of period of the perio	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of period of the provisions of period of the provision of period of the period of the provision of period of the perio	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perl Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this docentric description.	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of period of the provisions of period of the provision of period of the period of the provision of period of the perio	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perilippines. I authorize the agency head/authorized repreagree that any misrepresentation made in this docadministrative/criminal case/s against me.	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perl Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me.	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perior philippines. I authorize the agency head/authorized representation made in this docadministrative/criminal case/s against me.	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of peri Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perl Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me.	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of peri Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the b	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perior perior agree that any misrepresentation made in this docadministrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID. PHIL ID ID/License/Passport No.: 6503-7683-2961-8478	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the b	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: y ID No: ENNO ENNO
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applie NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pertagree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the b	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y:
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perior perior agree that any misrepresentation made in this docadministrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 - LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the b FEBRUARY 27, 2025 Date Accomplished	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of peri Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 - LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the b FEBRUARY 27, 2025 Date Accomplished	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: y ID No: ENNO ENNO
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of perior perior agree that any misrepresentation made in this docadministrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 - LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state cument and its attachments shall cause Signature (Sign inside the b FEBRUARY 27, 2025 Date Accomplished MAR 2025 , affiant exhibiting	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of peri Philippines. I authorize the agency head/authorized repre agree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 - LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the isentative to verify/validate the contents state current and its attachments shall cause Signature (Sign inside the break of the inside the break of	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pertoperagree that any misrepresentation made in this docadministrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 -LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the issentative to verify/validate the contents state cument and its attachments shall cause Signature (Sign inside the b FEBRUARY 27, 2025 Date Accomplished MAR 2025 ATTY RUBIE CHARLES D. PA	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pertoperagree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 -LEYTE, LEYTE DOC. No. 14 Page No. 1500	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the become feeling of the sentative to verify/validate the contents state cument and its attachments shall caus Signature (Sign inside the becomplished MAR 2025 ATTACHMEN AND ARTHUR DEC. 31. PORT ATTACHMEN NO. 66762	TEL NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pertoperagree that any misrepresentation made in this docadministrative/criminal case/s against me. Government Issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 -LEYTE, LEYTE	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the sentative to verify/validate the contents state cument and its attachments shall cause Signature (Sign inside the bin FEBRUARY 27, 2025) Date Accomplished MAR 2025 ATTY RUBIE CHARLES D. PANOTARY PUBLIC N.C. No. 08-2026-UNTIL DEC. 31, Roll of Author No. 0173	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark
a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent? 41. REFERENCES (Person not related by consanguinity or affinity to applic NAME DR. GERALD B. MONSANTO HON. GREGORIO DELANTAR HON.LOUIS DARWIN PONFERRADA 42. I declare under oath that I have personally accomplish complete statement pursuant to the provisions of pertoperagree that any misrepresentation made in this dot administrative/criminal case/s against me. Government Issued ID (i e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: PHIL ID ID/License/Passport No.: 6503-7683-2961-8478 Date/Place of Issuance: 08/07/2022 -LEYTE, LEYTE DOC. No. 14 Page No. 1500	BRGY. SILAD VILLABA, LEYTE BRGY. CONSUEGRA, LEYTE, LEYTE BALACSON, KAWAYAN, BILIRAN ed this Personal Data Sheet which is a trinent laws, rules and regulations of the isentative to verify/validate the contents state cument and its attachments shall cause Signature (Sign inside the b FEBRUARY 27, 2025 Date Accomplished MAR 2025 ATTY RUBIE CHARLES D. PA	TEL. NO. N/A N/A N/A N/A N/A N/A N/A N/	y ID No: Y ID No: Right Thumbmark