

CS Form No. 33-A
Revised 2018



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY



NCRMA 8. A.B.I.
Sr. HR Specialist

Ms. LORENA M. CASTILLO

You are hereby appointed as Administrative Aide I (Utility Worker I) SG-1 under
(Position Title)

Permanent status at the Office of the Mayor with a compensation rate of Nine Thousand Three Hundred
(Permanent, Temporary, etc.) (Office/Department/Unit)

Eighty Eight Pesos (P 9,388.00) per month.

The nature of this appointment is Original vice Newly Created
(Original, Promotion, etc.)

who was Vacant with Plantilla Item No. 5.
(Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing authority.

Very truly yours,

Subject to six (6) months
probationary period

JANET MAGPANTAY ILAGAN
Municipal Mayor

September 16, 2022
Date of Signing

CSC ACTION: APPROVED
DRY SEAL

LILY BETH L. MAJOMOT
Director II

Authorized Official
Date

SEP 28 2022

OCT 04 2022
(Stamp of Date Release)
3-15

Certification

This is to certify that all requirements and supporting papers pursuant to **CSC MC No. 24, s. 2017, as amended**, have been complied with, reviewed and found to be in order.

The position was published at CSC Job Portal from August 24, 2022 to September 8, 2022 and posted in CSC-FO Batangas , Public Market, Office Lobby from August 24, 2022 to September 8, 2022 in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on September 9, 2022.


GALLY D. TIPAN
OIC- Mun. Human Resource Management Officer

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on September 13, 2022.

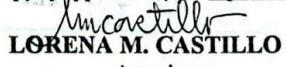

JANET MAGPANTAY ILAGAN
Municipal Mayor

CSC Notation

ANY ERASURE OR ALTERATION ON THE CSC ACTION SHALL NULLIFY OR INVALIDATE THIS APPOINTMENT EXCEPT IF THE ALTERATION WAS AUTHORIZED BY THE COMMISSION.

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement

Received original/photocopy of appointment on September 16, 2022

LORENA M. CASTILLO
Appointee



CS Form No. 33-A

Revised 2018



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

Ms. LORENA M. CASTILLO

You are hereby appointed as Administrative Aide I (Utility Worker I) SG-1 under
(Position Title)

Permanent status at the Office of the Mayor with a compensation rate of Nine Thousand Three Hundred
(Permanent, Temporary, etc.) (Office/Department/Unit)

Eighty Eight Pesos (P 9,388.00) per month.

The nature of this appointment is Original vice Newly Created
(Original, Promotion, etc.)

who was Vacant with Plantilla Item No. 5.
(Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing authority.

Very truly yours,

JANET MAGPANTAY ILAGAN
Municipal Mayor

September 16, 2022
Date of Signing

CSC ACTION:

DRY SEAL

Authorized Official
Date

(Stamp of Date Release)

Certification

This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

The position was published at CSC Job Portal from August 24, 2022 to September 8, 2022 and posted in CSC-FO Batangas, Public Market, Office Lobby from August 24, 2022 to September 8, 2022 in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on September 9, 2022.


GALLY D. TIPAN
OIC- Mun. Human Resource Management Officer

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on September 13, 2022.


JANET MAGPANTAY ILAGAN
Municipal Mayor

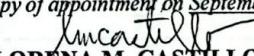
CSC Notation

RECEIVED
CIVIL SERVICE COMMISSION
16 SEPTEMBER 2022
10:00 AM
RECORDED
16 SEPTEMBER 2022
10:00 AM

ANY ERASURE OR ALTERATION ON THE CSC ACTION SHALL NULLIFY OR INVALIDATE THIS APPOINTMENT EXCEPT IF THE ALTERATION WAS AUTHORIZED BY THE COMMISSION.

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement

Received original/photocopy of appointment on September 16, 2022

LORENA M. CASTILLO
Appointee

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.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes () use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1. CS ID No (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	CASTILLO		
FIRST NAME	LORENA		
MIDDLE NAME	MORADA		
3. DATE OF BIRTH (mm/dd/yyyy)	11/20/1970	16. CITIZENSHIP If holder of dual citizenship, please indicate the details.	
4. PLACE OF BIRTH	POBLACION MATAASNAKAHOY, BATANGAS		
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	RESIDENTIAL ADDRESS House/Block/Lot No. 132 RAFAEL LUBIS Street N/A IV Subdivision/Village Barangay MATAASNAKAHOY BATANGAS City/Municipality Province 4223	
7. HEIGHT (m)	1.54		
8. WEIGHT (kg)	60	ZIP CODE	
9. BLOOD TYPE	O	PERMANENT ADDRESS House/Block/Lot No. 132 RAFAEL LUBIS Street N/A IV Subdivision/Village Barangay MATAASNAKAHOY BATANGAS City/Municipality Province	
10. GSIS ID NO.	2006127966		
11. PAG-IBIG ID NO.	121307333233	ZIP CODE	4223
2. PHILHEALTH NO.	092538214533	19. TELEPHONE NO.	(043)727-2515
3. SSS NO.	UMID 0111-5764121-4	20. MOBILE NO.	09151963398
14. TIN NO.	614809051	21. E-MAIL ADDRESS (if any)	lhorencestillo20@yahoo.com
15. AGENCY EMPLOYEE NO.	OMM005		

II. FAMILY BACKGROUND

22 SPOUSE'S SURNAME	CASTILLO			23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	LAMBERTO	NAME EXTENSION (JR.,SR)	N/A	LORD ACE M. CASTILLO	05/19/1999
MIDDLE NAME	CAPANAY			LANDER AARON M. CASTILLO	11/9/2003
OCCUPATION	ON CALL WAITER			LOURDES ANGEL M. CASTILLO	2/11/2009
EMPLOYER/BUSINESS NAME	MPR CATERING SERVICES			LOVELY ANNE M. CASTILLO	08/19/2011
BUSINESS ADDRESS	BARANGAY UPA, MATAASNAKAHOY, BATANGAS			NOTHING FOLLOWS	
TELEPHONE NO.	09352120461				
24 MOTHER'S SURNAME	MORADA				
FIRST NAME	ANTONIO	NAME EXTENSION (JR.,SR)	N/A		
MIDDLE NAME	CALINGASAN				
25 MOTHER'S MAIDEN NAME					
SURNAME	VERGARA				
FIRST NAME	LUISITA				
MIDDLE NAME	MENDOZA			(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/UNITS EARNED	YEAR GRADUATED	SCHOLARSHIP/ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	PAARALANG SENTRAL NG MATAASNAKAHOY	PRIMARY	1977	1983	GRADUATED	1983	N/A
SECONDARY	LA PURISIMA CONCEPCION ACADEMY	SECONDARY	1983	1987	GRADUATED	1987	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	LYCEUM OF BATANGAS	ASSOCIATE HOTEL AND RESTAURANT MANAGEMENT	1987	1989	GRADUATED	1989	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE	<i>lhorencestillo</i>	DATE	February 15, 2023
-----------	-----------------------	------	-------------------

IV. CIVIL SERVICE ELIGIBILITY

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format '00-0') INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To						
1-Jan-23	PRESENT	ADMIN AIDE I (UTILITY WORKER I)	OFFICE OF THE MAYOR	9,750.00	1-1	PERMANENT	Y
16-Sep-22	31-Dec-22	ADMIN AIDE I (UTILITY WORKER I)	OFFICE OF THE MAYOR	9,388.00	1-1	PERMANENT	Y
Jan-22	15-Sep-22	JOB ORDER/CLERICAL AIDE	COMMISSION ON AUDIT (LGU-MATAASNAKAHOY)	6,615.00	N/A	JOB ORDER	N
Sep-19	2022	JOB ORDER/CLERICAL AIDE	COMMISSION ON AUDIT (LGU-MATAASNAKAHOY)	6,300.00	N/A	JOB ORDER	N
Feb-19	Aug-19	JOB ORDER/CLERICAL AIDE	COMMISSION ON AUDIT (LGU-MABINI)	6,300.00	N/A	JOB ORDER	N
2013	2016	JOB ORDER/CLERICAL AIDE	COMMISSION ON AUDIT (LGU-MATAASNAKAHOY)	4,200.00	N/A	JOB ORDER	N
2010	2013	JOB ORDER/CLERICAL AIDE	COMMISSION ON AUDIT (LGU-MATAASNAKAHOY)	2,940.00	N/A	JOB ORDER	N

NOTHING FOLLOWS

(Continue on separate sheet if necessary)

SIGNATURE

Incastillo

DATE

February 15, 2023

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANISATIONS

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc.)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
SKILLS TRAINING ON BALLOONS AND FLOWER ARRANGEMENT	5/21/2018	5/23/2018	24.0	N/A	DSWD SUSTAINABLE LIVELIHOOD PROGRAM (SLP)
SEMINAR/WORKSHOP ON ADMINISTRATIVE - JUSTICE	10/25/2022	10/26/2022	16	N/A	LGU MATAASNAKAHoy

NOTHING FOLLOWS

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

(Continue on separate sheet if necessary)

SIGNATURE

lucastillo

DATE

February 15, 2023

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to chief of bureau or office or to the person _____ has immediate supervision over you in the Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A																			
<p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If Filed: N/A Status of Case/s: N/A																			
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A																			
<p>37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A																			
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>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?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A																			
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): N/A																			
<p>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</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: N/A																			
<p>41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)</p>																				
<table border="1"> <thead> <tr> <th>NAME</th> <th>ADDRESS</th> <th>TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>Mrs. Ma. Teresa C. De Castro</td> <td>Brgy. Bolbok, Batangas City</td> <td>9173283958</td> </tr> <tr> <td>Mrs. Lenilyn C. Caraan</td> <td>Brgy. II-A, Mataasnakahoy, Batangas</td> <td>9175361803</td> </tr> <tr> <td>Ms. Emilia R. Malaluan</td> <td>Brgy.I, Mataasnakahoy, Batangas</td> <td>9175491663</td> </tr> </tbody> </table>	NAME	ADDRESS	TEL. NO.	Mrs. Ma. Teresa C. De Castro	Brgy. Bolbok, Batangas City	9173283958	Mrs. Lenilyn C. Caraan	Brgy. II-A, Mataasnakahoy, Batangas	9175361803	Ms. Emilia R. Malaluan	Brgy.I, Mataasnakahoy, Batangas	9175491663								
NAME	ADDRESS	TEL. NO.																		
Mrs. Ma. Teresa C. De Castro	Brgy. Bolbok, Batangas City	9173283958																		
Mrs. Lenilyn C. Caraan	Brgy. II-A, Mataasnakahoy, Batangas	9175361803																		
Ms. Emilia R. Malaluan	Brgy.I, Mataasnakahoy, Batangas	9175491663																		
<p>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.</p>																				
<table border="1"> <tr> <td colspan="2">Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> <td>PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td colspan="3">Government Issued ID: UNIFIED MULTI-PURPOSE ID</td> </tr> <tr> <td colspan="3">ID/License/Passport No.: 0111-5764121-4</td> </tr> <tr> <td colspan="3">Date/Place of Issuance:</td> </tr> </table>	Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance	Government Issued ID: UNIFIED MULTI-PURPOSE ID			ID/License/Passport No.: 0111-5764121-4			Date/Place of Issuance:			<table border="1"> <tr> <td></td> </tr> <tr> <td>Signature (Sign inside the box)</td> </tr> <tr> <td>February 15, 2023</td> </tr> <tr> <td>Date Accomplished</td> </tr> </table>		Signature (Sign inside the box)	February 15, 2023	Date Accomplished	<table border="1"> <tr> <td></td> </tr> <tr> <td>Right Thumbmark</td> </tr> </table>		Right Thumbmark
Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.)		PLEASE INDICATE ID Number and Date of Issuance																		
Government Issued ID: UNIFIED MULTI-PURPOSE ID																				
ID/License/Passport No.: 0111-5764121-4																				
Date/Place of Issuance:																				
																				
Signature (Sign inside the box)																				
February 15, 2023																				
Date Accomplished																				
																				
Right Thumbmark																				

SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.





Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

CERTIFICATION

TO WHOM IT MAY CONCERN:

This is to certify that in connection with the appointment of Ms. LORENA M. CASTILLO as Administrative Aide I (Utility Worker I) in the Office of the Mayor of this municipality, all pertinent requirements contained in RA 7160 in Section 325 on limitation of personal services in the total annual/supplemental appropriation, salary rate, etc., have been complied with.


JANET MAGPANTAY ILAGAN
Municipal Mayor



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

OFFICE OF THE MUNICIPAL ACCOUNTANT

CERTIFICATION

THIS IS TO CERTIFY that funds are available for the position of Administrative Aide I (Utility Worker I) in the Office of the Mayor of this municipality, with Salary Grade 1 amounting to ONE HUNDRED TWELVE THOUSAND SIX HUNDRED FIFTY SIX PESOS (P 112,656.00) per annum as per Annual Budget CY-2022 of this municipality.

Issued this 16th day of September , 2022 at Mataasnakahoy, Batangas.

A handwritten signature in black ink, appearing to read "Lenilyn C. Caraan".

LENILYN C. CARAAN
Municipal Accountant

Republic of the Philippines
POSITION DESCRIPTION FORM
DBM-CSC Form No. 1
(Revised Version No. 1, s. 2018)

1. POSITION TITLE (as approved by authorized agency) with parenthetical title

Administrative Aide I (Utility Worker I)

2. ITEM NUMBER

3. SALARY GRADE

5

1

4. FOR LOCAL GOVERNMENT POSITION, ENUMERATE GOVERNMENTAL UNIT AND CLASS

Province
 City
 Municipality

1st Class
 2nd Class
 3rd Class
 4th Class

5th Class
 6th Class
 Special

**5. DEPARTMENT, CORPORATION OR AGENCY/
LOCAL GOVERNMENT**

6. BUREAU OR OFFICE

Local Government Unit of Mataasnakahoy, Batangas

Office of the Mayor

7. DEPARTMENT / BRANCH / DIVISION

8. WORKSTATION / PLACE OF WORK

Office of the Mayor

Office of the Mayor

**9. PRESENT APPROP
ACT**

10. PREVIOUS APPROP ACT

11. SALARY AUTHORIZED

12. OTHER COMPENSATION

SB Resolution No. 084-
S-2022, Ordinance of
Budget No. 05-S-2022

N/A

PERA	2,000.00
Clothing Allow.	6,000.00
Cash Gift	5,000.00
Year End Bonus	9,388.00
Mid-year Bonus	9,388.00
PEI	5,000.00

13. POSITION TITLE OF IMMEDIATE SUPERVISOR

14. POSITION TITLE OF NEXT HIGHER SUPERVISOR

Municipal Mayor

None

15. POSITION TITLE, AND ITEM OF THOSE DIRECTLY SUPERVISED

(if more than seven (7) list only by their item numbers and titles)

POSITION TITLE

ITEM NUMBER

N/A

N/A

16. MACHINE, EQUIPMENT, TOOLS, ETC., USED REGULARLY IN PERFORMANCE OF WORK

Broom, Dustpan, Telephone, Computer, Logbook

17. CONTACTS / CLIENTS / STAKEHOLDERS

17a. Internal

Occasional

Frequent

17b. External

Occasional

Frequent

Executive /

General Public

Managerial

Supervisors

Non-Supervisors

Staff

General Public

Other Agencies

Others (Please Specify): _____

18. WORKING CONDITION

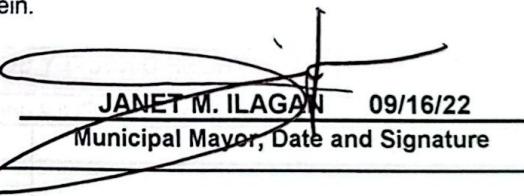
Office Work

Other/s (Please Specify)

Field Work

19. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE UNIT OR SECTION

Exercise control and supervision over all local administrative affairs of the municipality, enforce the laws and ordinances, initiate and maximize generation of resources and revenues and ensure the delivery of basic services.

21. QUALIFICATION STANDARDS			
21a. Education	21b. Experience	21c. Training	21d. Eligibility
Must be able to read and write	None Required	None Required	None Required (MC 11, s. 96-Cat III)
21e. Core Competencies		Competency Level	
None Yet		None Yet	
21f. Leadership Competencies		Competency Level	
None Yet		None Yet	
22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)			
<i>Percentage of Working Time</i>	(State the duties and responsibilities here:)		
30%	Maintain the cleanliness and orderliness in the office		
20%	Arrange various decorations in the office		
10%	Answering telephone calls		
10%	Filing of incoming and outgoing communications		
10%	May be assigned to run errands from time to time		
10%	Entertain Office visitors		
10%	Perform such other duties and responsibilities that me be assigned from time to time		
23. ACKNOWLEDGMENT AND ACCEPTANCE:			
I have received a copy of this position description. It has been discussed with me and I have freely chosen to comply with the performance and behavior/conduct expectations contained herein.			
 LORENA M. CASTILLO 09/16/22 Employee's Name, Date and Signature		 JANET M. ILAGAN 09/16/22 Municipal Mayor, Date and Signature	



Republic of the Philippines
Province of Batangas
Municipality of Mataasnakahoy

OATH OF OFFICE

I, LORENA M. CASTILLO of Brgy. IV, Mataasnakahoy, Batangas having been appointed to the position of Administrative Aide I (Utility Worker I), hereby solemnly swear, that I will faithfully discharge to the best of my ability, the duties of my present position and of all others that I may hereafter hold under the Republic of the Philippines; that I will bear true faith and allegiance to the same; that I will obey the laws, legal orders, and decrees promulgated by the duly constituted authorities of the Republic of the Philippines; and that I impose this obligation upon myself voluntarily, without mental reservation or purpose of evasion.

SO HELP ME GOD.


LORENA M. CASTILLO

(Signature over Printed Name of the Appointee)

Government ID: UMID SSS
ID Number : 0111-5764121-4
Date Issued : N/A

Subscribed and sworn to before me this 16th day of September, 2022 in Mataasnakahoy Batangas, Philippines.


JANET MAGPANTAY ILAGAN
Municipal Mayor



CS Form No. 4
Revised 2018

Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

CERTIFICATION OF ASSUMPTION TO DUTY

This is to certify that Ms. LORENA M. CASTILLO has assumed the duties and responsibilities as Administrative Aide I (Utility Worker I) in the Office of the Mayor effective September 16, 2022.

This certification is issued in connection with the issuance of the appointment of Ms. Castillo as Administrative Aide I (Utility Worker I).

Done this 16th day of September, 2022 in Mataasnakahoy, Batangas.

JANET MAGPANTAY ILAGAN
Municipal Mayor

Date: September 16, 2022

Attested by:

GALLY D. TIPAN
OIC- Mun. Human Res. Mgt. Officer

201 file
Admin
COA
CSC



OFFICIAL TRANSCRIPT OF RECORDS

Name	MORADA, LORENA VERGARA	Student No.	87107582
Address	Mataas na Kahoy, Batangas	College of Int'l Tourism & Hospitality Management	
Elementary	Mataas na Kahoy Central School	1983	(Associate in Hotel & Restaurant Management)
High School	La Purisima Concepcion Academy	1987	Date of Admission First Semester, 1987-1988

Grading System:	1.00 = A+ = 99 and above (Outstanding)	2.00 = B = 87-89 (Good)	3.00 = C = 75-77 (Passing)	NFE = No Final Exam
	1.25 = A = 96-98 (Excellent)	2.25 = B- = 84-86 (Satisfactory)	5.00 = D = 74 and below (Failing)	INC = Incomplete
	1.50 = A- = 93-95 (Superior)	2.50 = C+ = 81-83 (Fairly Satisfactory)	4.00 = D+ = Officially Dropped	NC = No Credit
	1.75 = B+ = 90-92 (Very Good)	2.75 = C = 78-80 (Fair)	4.75 = D- = Unofficially Dropped	

Subject Code	Descriptive Title	RATING		
		Final	Completion	Units
<u>First Semester, 1987-1988</u>				
Tourism 1	Introduction to Tourism	80		3
Engl 1	Communication Skills 1	79		3
Fil 1	Sining ng Pakikipagtalastasan	84		3
Bus Math 0	Business Mathematics	77		3
Per Dev	Personality Development & Public Relations			
FD 11	Restaurant Management	78		3
HRM 11	Food Preparation & Processing	80		3
History 1	Introduction to Hotel & Restaurant Management	75		3
PE 1	Philippine History	77		3
	Physical Education 1	89		1
<u>Second Semester, 1987-1988</u>				
Engl 2	Communication Skills 2	75		3
Fil 2	Panitikang Pilipino	79		3
HRM 12	Hotel & Restaurant Facilities, Lay-out & Equipment Planning			
FD 12	Catering & Quantity of Food Production	80		3
Curr Iss	Philippine Business Environment & National Contemporary Development	76		3
Acctg 1	Accounting Process	75		3
FD 13	Meal Planning & Health Service	78		6
PE 2	Physical Education 2	76		3
		85		1
<u>Summer, 1987-1988</u>				
Type 1	Elementary Typewriting	78		(3)
Engl 4	Oral English	79		3
Psycho 1	General Psychology	75		3
FD 14	Food & Beverage Administration	77		3
<u>First Semester, 1988-1989</u>				
Type 2	Speed Development	75		(3)
Mktg 1	Principles of Marketing	86		3
Philo 1	Philosophy of Man	79		3
Mgt 1	Business Organization & Management	78		3
Pol Sc 2	Philippine Government w/ New Constitution	75		3
FD 15	Food Standard and Sanitation	80		3
FD 16	International Hotel Cuisine	82		3
Bus. Comm	Business Communication	79		3
PE 3	Physical Education 3	92		1
<u>Second Semester, 1988-1989</u>				
HRM 13	Hotel Sales & Marketing	81		3
Ethics	Business Ethics & Logic	80		3
Mgt 12	Human Resources Management	78		3

Remarks:

More on next page...

CERTIFIED TRUE COPY
OF THE ORIGINAL

(Not Valid Without University Seal)

Prepared by

JOHN JEFFREY C. MARTINEZ

Verified by UNIVERSITY REGISTRAR

ERRON M. DE TORRES

Approved by

GERALDINE DOOLY-DE ERIT
University Registrar

July 4, 2022



LPU
LYCEUM OF THE PHILIPPINES UNIVERSITY
MANILA • MAKATI • BATANGAS • LAGUNA • CAVITE • DAVAO

Granted AUTONOMOUS STATUS
by Commission on Higher Education (CHED)

An ISO 9001:2015
Certified Organization

FM-LPU-REGO-12/08

Office of the University Registrar
Capitol Site, Batangas City
Tel +63 43 723 0706 loc. 157-159
Telefax +63 43 723 2038
www.lpubatangas.edu.ph

OFFICIAL TRANSCRIPT OF RECORDS

Name	MORADA, LORENA VERGARA	Student No.	87107582
Address	Mataas na Kahoy, Batangas	College of Int'l Tourism & Hospitality Management	
Elementary	Mataas na Kahoy Central School	1983	(Associate in Hotel & Restaurant Management)
High School	La Purisima Concepcion Academy	1987	Date of Admission First Semester, 1987-1988

page 2 of 2 pages

SUBJECTS

RATING

Subject Code	Descriptive Title	Final	Completion	Units
Law 11	Obligations & Contracts	75		3
Econ 1	Microeconomics with Taxation & Land Reform	76		3
Soc Sc 25	Rizal Course	78		3
PE 4	Physical Education 4	83		1
HRM 14	In-house Hotel & Restaurant Practicum (300 hours) Second Semester, 1988-1989 Practicum (300 hours) MAKATI SPORTS CLUB, Inc. (150 hours) MIDLAND PLAZA HOTEL (150 hours) December 4, 1988 to January 16, 1989 END OF TRANSCRIPT	Passed		6

Grading System:
1.00 = A+ = 99 and above (Outstanding)
1.25 = A = 96-98 (Excellent)
1.50 = A- = 93-95 (Superior)
1.75 = B+ = 90-92 (Very Good)

NFE = No Final Exam
INC = Incomplete
NC = No Credit
OD = Officially Dropped
UD = Unofficially Dropped

2.00 = B = 87-89 (Good)
2.25 = B- = 84-86 (Satisfactory)
2.50 = C+ = 81-83 (Fairly Satisfactory)
2.75 = C = 78-80 (Fair)

Remarks:

Graduated with the title of **ASSOCIATE IN HOTEL & RESTAURANT MANAGEMENT (AHRM)** on March 30, 1989 under Special Order (B) (R-IV) No. 504-0445 series 1989 dated April 17, 1989 issued by the Department of Education, Culture, and Sports, Quezon City

(Not Valid Without University Seal)

July 4, 2022

Prepared by
JOHN JEFFREY C. MARTINEZ

Verified by

ERRON MIDE TORRES

Approved by

GERALDINE DOLODET
University Registrar

Lycéum of Batangas

LUNSOD NG BATANGAS
BATANGAS CITY

Sa Lahat ng Makakabasa Nito.
TO ALL PERSONS TO WHOM THIS PRESENTS MAY COME:

Bati:
GREETINGS:

Alamin na ang Pabahalaan, sa paggamit ng Kapangyarihang Kalob.

Be it Known that the Board of trustees by authority of the
ng Republika ng Pilipinas at sa tagubilin ng Sangguniang Akademiko ay
Republic of the Philippines and on recommendation of the Academic Council has
naggawad Kay

conferred upon

Lorena W. Morada

na natatuod sa lahat ng kinakailangan ukol dito, ng titulong
who has fulfilled all the requirements thereof, the degree

Pangangasiwa ng Hotel at Restoran

HOTEL AND RESTAURANT MANAGEMENT

Kalakip ang lahat ng Karapatan, Karangalan at mga pribilehiyo gayon din ang
with all the rights, honors and privileges as well as
mga tungkulin at pananagutang dooy naunhol.
obligations and responsibilities thereunto appertaining.

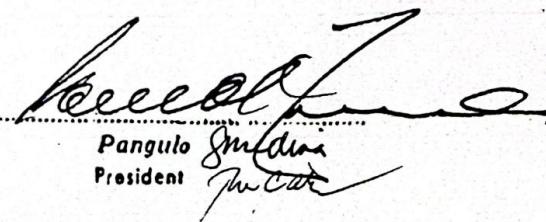
Bilang Katunayan ay ikinintal ang tatak ng Lycéum of Batangas
In testimony whereof hereto is affixed the seal of the Lycéum of Batangas
at ang mga tagda ng Pangulo at ng Dekano.
and the signatures of the President and the Dean.

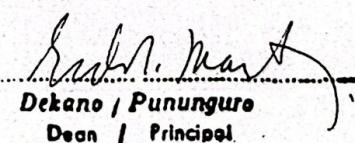
Inilagda sa Batangas, Pilipinas, ngayong ita ³⁰₁₉₈₉ ng Marso
Given at Batangas, Philippines, this day of March
taon ng ating Panginoon, Sabinsiyam na taan at walo't-siyam
in the year of our Lord, nineteen hundred and eightysix

S. O. No. (B) (R-IV) 504-0445

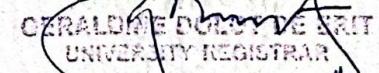
SERIES 1989

DATE April 11, 1989


Pangulo / President
Geraldine Dorothy S. M. Mart


Dekano / Punungulo
Dean / Principal

CERTIFIED TRUE COPY
OF THE ORIGINAL


GERALDINE DOROTHY S. M. MART
UNIVERSITY REGISTRAR

8/25

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
 b. Attach this certificate to original appointment, transfer and reemployment.
 c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- Blood Test
 Urinalysis
 Chest X-Ray
 Drug Test
 Psychological Test
 Neuro-Psychiatric Examination (if applicable)



FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
CASTILLO, LORENA MORADA			LGU MATAASNAKAHOY
ADDRESS			
132 R. LUBIS STREET, BRGY. IV, MATAASNAKAHOY, BATANGAS			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
51	FEMALE	MARRIED	ADMINISTRATIVE AIDE I (UTILITY WORKER I)

FOR THE LICENSED GOVERNMENT PHYSICIAN

<i>I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.</i>		
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE
KARLA M. CARAAN, MD		
AGENCY/Affiliation of Licensed Government Physician:		
Mataasnakahoy RHU		
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped
113447		
OFFICIAL DESIGNATION	BLOOD TYPE	
Municipal Health Officer	DATE EXAMINED	
	9/15/22	

MUNICIPAL HEALTH OFFICER <i>q/HS/RV</i>			OFFICIAL DESIGNATION
			DATE EXAMINED
			LICENSE NO. 113447
<p>AGENCY/Affiliation of Licensed Government Physician: MATASNAKAHAY RHU</p> <p>SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN: KARLA M. CARAN, MD</p> <p>OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE</p> <p>I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically FIT / UNFIT for employment.</p>			HEIGHT (M) WEIGHT (KG) BARE FOOT STRIPPED TYPE HEIGHT (M) WEIGHT (KG) BARE FOOT STRIPPED TYPE

FOR THE LICENSED GOVERNMENT PHYSICIAN

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)	AGENCY / ADDRESS	ADDRESS	AGE	SEX	CIVIL STATUS	PROPOSED POSITION	ADMINISTRATIVE AIDE I (UTILITY WORKER I)
CASTILLO, LORENA MORALES	LGU MATASNAKAHAY 132 R. LUBIS STREET, BRGY. IV, MATASNAKAHAY, BATANGAS	51		FEMALE	MARRIED		

FOR THE PROPOSED APPOINTEE

Neuro-Psychiatric Examination (if applicable)

Psychologic Test

Drug Test

Chest X-Ray

Urinalysis

Blood Test

Chest X-Ray

Drug Test

Urinalysis

Blood Test

Chest X-Ray

<

AO

Report ID: DTO-R03



**DEPARTMENT OF HEALTH
SHALOM MEDICAL DIAGNOSTIC LABORATORY, INC.**
ZENAIDA ARCADE M. H. DEL PILAR ST., BRGY. 2, BATANGAS CITY, BATANGAS

Phone Number 0437861798

DRUG TEST REPORT

TI002070

75

CCF No: R202208120184
Name: CASTILLO, LORENA MORADA
Birthdate: 11/20/1970 Age: 51

Gender: F

Transaction Date Time: 8/12/2022 12:00:00AM
Report Date Time: 8/13/2022 4:38:53PM

Test Method TEST KIT

Purpose
Random - Government Employee

Requesting Parties
LGU MATAASNAKAHOY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	PASSED
TETRAHYDROCANNABINOL	NEGATIVE	PASSED

Test Conducted By

68 KATE JOANNE BULACLAC CABUNGCAL

Cabungcal
Analyst

Approved By

Alpha Grace B Cabic
DR. ALPHA GRACE B CABIC

66

Head of Laboratory

Valid Within 12 Month/s from Transaction Date

This Is a DOH-DDB IDTOMIS generated report



IMUS CARE LABORATORY & DIAGNOSTIC CENTER CO.

230 Tamsui St., Bayan Luma II, Imus, Cavite

Tel.no. (046) 683-2963 / 09327081261 / 09651577611

FDA License No. IV-M-0629218276979



PATIENT NAME: **CASTILLO , LORENA**

CASE No: 22- 113

AGE/SEX: 51 FEMALE

DATE: JULY 01, 2022

REQUESTED BY: MATAAS NA KAHOY , BATANGAS

RADIOGRAPHIC REPORT

CHEST PA:

- The lungs are clear.
- The heart is not enlarged.
- The sulci and hemi-diaphragms are intact.
- No other remarkable findings.

IMPRESSION:

NORMAL CHEST FINDINGS

MAGNUS REX H. LIMCACO, MD, FPCR
RADIOLOGIST / SONOLOGIST

White blood cells	3.8	5.0-10.0 x 10 ⁹ /L
Segmenters	0.54	0.55-0.68
Lymphocytes	0.38	0.25-0.39
Monocytes	0.08	0.02-0.08
Eosinophils		0 -0.05
Platelet count	229	150-450 x10 ⁹ /L

REMARKS:

MYKEE L. DE SILVA, RMT

MEDICAL TECHNOLOGIST LIC#83300

SPENCER S. WATANABE, MD, FPSP, MHA

PATHOLOGIST LIC#0112723



St. Joseph HealthCare, Inc.

2ND Floor LIPA CITY COMMERCIAL CENTER, A. MABINI St. Cor. P. Torres St. Lipa City, Batangas
Tel No. : (043) 757-4675

Name: CASTILLO, LORENA

Patient Pin: SJHI87249

Age : 51 Sex : FEMALE

Company: WALK IN

Sample Date: September 10, 2022

LABORATORY REPORT

CLINICAL MICROSCOPY

URINALYSIS

DESCRIPTION	RESULT	NORMAL VALUE
COLOR	LIGHT YELLOW	
TRANSPARENCY	SLIGHTLY TURBID	
PH	7.0	5.0-8.0
SPECIFIC GRAVITY	1.005	1.005-1.030
SUGAR	NEGATIVE	NEGATIVE
PROTEIN	NEGATIVE	NEGATIVE
White blood cells	0-2/HPF	
RED BLOOD CELLS	6-8/HPF	
A.URATES/PHOSPHATES		
EPITHELIAL CELLS	FEW	
BACTERIA	FEW	
MUCUS THREADS		
PREGNANCY TEST		

REMARKS:

MYKEE L. DE SILVA, RMT
MEDICAL TECHNOLOGIST LIC# 83300

SPENCER S. WATANABE, MD, FPSP, MHA
PATHOLOGIST LIC#0112723



MLT Psychological Evaluation Center

PNP Accreditation No. - 2000 - 0014
Main Office: 316 Quezon Avenue, Quezon City
Telephone No. 929-7261 / 410-6639

TO:

SUBJECT: PSYCHOLOGICAL EXAMINATION

NAME: LORENA M. CASTILLO

DATE OF EXAM: 10 Sept. 2022

AGE: 51

CIVIL STATUS: Married

HOME ADDRESS: Brgy. IV, Mataasnakahoy, Batangas

EVALUATION REPORT

FACTORS	FINDINGS
Intelligence (Ability to learn & solve problems)	ABOVE AVERAGE
Educational Attainment	ASS.in HRM
Experience (relevance to position)	9 Yrs. CLERICAL AIDE
Motivation: Financial Security	AVERAGE
Change in Assignment	NONE
Honesty/Integrity	AVERAGE
Social Adjustment	AVERAGE
Loyalty (Identifying with superiors)	AVERAGE
Hostility & Violent Tendencies	No trace of violence
Acceptance of Responsibility	AVERAGE
Energy and Initiative	AVERAGE
Independence (self-reliance)	AVERAGE
Self-Discipline	AVERAGE
Steadiness and Endurance Under Pressure	HIGH

SUMMARY

Intelligence Quotient: **105**

Classification: ABOVE AVERAGE

Percentage Score: **37TH PERCENTILE**

Personality Evaluation: Subject seeks stability and good provision for her children's educational supplement. Subject longs for career advancement as she fully dedicates more time with work obligations. She finds happiness in the presence of her family and loved ones.

REMARKS: Recommended

MA. CORAZON P. PAMINTUAN
Psychologist
(Accreditation No. 130)

NATIONAL BUREAU OF INVESTIGATION NATIONAL BUREAU OF INVESTIGATION

REBUREAU OF INVESTIGATION

Republic of the Philippines
Department of Justice
National Bureau of Investigation



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.

M630KLTA07-LA1188954

FAMILY NAME

MORADA

MIDDLE NAME

VERGARA

ADDRESS

132 RAFAEL LUBIS STREET BARANGAY IV MATAASNAKAHOY BATANGAS

DATE OF BIRTH

November 20, 1970

CITIZENSHIP

FILIPINO

PURPOSE

MULTI-PURPOSE CLEARANCE

REMARKS

NO DEROGATORY RECORD

VALID UNTIL

July 04, 2023

FIRST NAME

LORENA

HUSBAND'S SURNAME

CASTILLO

PLACE OF BIRTH

MATAASNAKAHOY, BATANGAS

CIVIL STATUS

MARRIED

GENDER

FEMALE

SIGNATURE



Date Printed: Monday, July 18, 2022 11:37 AM

Agency LA

DATID MILA

CASID MILA

BIOID MILA

O.R. No. MP0YYOMJWT

RECID/strandid

O.R. Date 07/04/2022 0:16:17 PM

INTID

DST PAID

PRTID MILA



M630KLTA07-LA1188954

ATTY. MEDARDO G. DE LEMOS
Officer-in-Charge

MUNICIPAL FORM NO. 102 - (Revised Dec. 1, 1958)

(TO BE ACCOMPLISHED IN DUPLICATE)

REPUBLIC OF THE PHILIPPINES

CERTIFICATE OF LIVE BIRTH

(FILE OUT COMPLETELY, ACCURATELY, LEGIBLY IN INK OR TYPEWRITER)

Province: Batangas
 City or Municipality: Mataasnakahoy

Register Number:

(a) Civil Registrar-General No. 288
 (b) Local Civil Registrar No.

1. PLACE OF BIRTH		2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
a. PROVINCE	<u>Batangas</u>	a. PROVINCE <u>Batangas</u>
b. CITY OR MUNICIPALITY	<u>Mataasnakahoy</u>	b. CITY OR MUNICIPALITY <u>Mataasnakahoy</u>
c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address)	<u>Poblacion</u>	c. NUMBER AND STREET <u>Poblacion</u>
d. IS PLACE OF BIRTH INSIDE CITY LIMITS?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	d. Is Residence Inside City Limits? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
		e. Is Residence ON A FARM? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)	3. NAME (Type or Print)	4. SEX	5. If TWIN OR TRIPLET, WAS CHILD	6. DATE OF BIRTH
<u>Batangas</u>	<u>LORENA</u>	<u>F</u> <input checked="" type="checkbox"/> This Birth <u>Female</u> <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Triplet	<u>1st</u> <input type="checkbox"/> <u>2nd</u> <input type="checkbox"/> <u>3rd</u> <input type="checkbox"/>	<u>Month</u> <u>Nov</u> , <u>Day</u> <u>30</u> <u>Year</u> <u>1970</u>

FATHER: CHILD	7. Name	First <u>Antonio</u> Middle <u>Caligasun</u> Last <u>Morada</u>	RELIGION <u>R.C. Catholic</u>	8. NATIONALITY <u>Fil.</u>	9a. RACE <u>BROWN</u>
	9. AGE (At time of this birth)	10. BIRTHPLACE <u>M. Kahoy, Batangas</u>	11a. USUAL OCCUPATION <u>Soldier</u>	11b. KIND OF BUSINESS OR TRADE <u>ARMED FORCES</u>	
MOTHER:	12. MAIDEN NAME <u>Luisita Menuez Vergara</u>	RELIGION <u>R.C. Catholic</u>	13. NATIONALITY <u>Fil.</u>	13a. RACE <u>BROWN</u>	
	14. AGE (At time of this birth)	15. BIRTHPLACE <u>M. Kahoy, Batangas</u>	16. Previous Deliveries to Mother (Do not include this birth)	4	
	Years <u>28</u>		a. How many children are now living? <u>5</u>	b. How many other children were born alive but now dead? <u>0</u>	c. How many fetal deaths (fetuses born dead any time after conception)? <u>0</u>
	17a. INFORMANT'S SIGNATURE <u>RUBEN LIBER</u>				
	b. NAME IN PRINT: <u>RUBEN LIBER</u>				
	c. ADDRESS: <u>M. Kahoy, Batangas</u>				

18. MOTHER'S MAILING ADDRESS: (Number, Street, City or Municipality, Province) Same Address

19. ATTENDANT AT BIRTH	d. DATE SIGNED BY ATTENDANT AT BIRTH
I hereby declare that I attended the birth of this child who was born alive at <u>12:50</u> o'clock <u>M.</u> on the date above indicated.	
e. SIGNATURE: <u>RUBEN LIBER</u>	f. TITLE OF ATTENDANT AT BIRTH:
g. NAME IN PRINT: <u>RUBEN LIBER</u>	<input type="checkbox"/> M.D. <input type="checkbox"/> MIDWIFE
h. ADDRESS: <u>M. Kahoy, Batangas</u>	<input type="checkbox"/> NURSE <input type="checkbox"/> OTHERS (Specify)

20. RECEIVED IN THE OFFICE OF THE LOCAL CIVIL REGISTRAR BY:	21. a. GIVEN NAME ADDED FROM SUPPLEMENTAL REPORT
a. SIGNATURE: <u>RUBEN LIBER</u>	b. DATE WHEN GIVEN NAME WAS SUPPLIED: <u>1070</u>
b. NAME IN PRINT: <u>RUBEN LIBER</u>	
c. TITLE OF POSITION: <u>Officer In Charge</u>	
d. DATE: <u>12/29/70</u>	

22a. LENGTH OF PREGNANCY	22b. WEIGHT AT BIRTH	23. LEGITIMATE
COMPLETED WEEKS.	LB.	OR YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
24. DATE AND PLACE OF MARRIAGE OF PARENTS (For illegitimate birth)	25. THIS CERTIFICATE IS PREPARED BY: <u>Lisa Grace S. Bersales</u>	
April <u>16</u> 19 <u>61</u>	SIGNATURE: <u>Lisa Grace S. Bersales</u>	
(Month) <u>April</u> (Date) <u>16</u> (Year) <u>1961</u>	NAME IN PRINT: <u>LISA GRACE S. BERSALES</u>	
City or Municipality <u>M. Kahoy</u> Province <u>Batangas</u>	TITLE OR POSITION: <u>Deputy Registrar</u>	
	DATE: <u>12/29/70</u>	

13-233

(SPACE FOR MEDICAL AND HEALTH ITEMS FOR SPECIAL PURPOSES)

06444-60-105JLB-00893-BI001

BRN
01018-A70XW01-2

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

Documentary
Stamp Tax Paid

T105064441050089308232017001

Municipal Form No. 97 (Form No. 13)
(Revised January 1993)

(To be accomplished in quadruplicate)

MARKS/ANNOTATION

Republic of the Philippines
OFFICE OF THE CIVIL REGISTRAR GENERAL
CERTIFICATE OF MARRIAGEProvince Batangas
City/Municipality MataasnakahoyBL Registry No. 97-124

Name of Contracting Parties	(first) <u>Lamberto C. Castillo</u>	(middle initial) <u></u>	(last) <u></u>	(first) <u>Lorenzo V. Morada</u>	(middle initial) <u></u>	(last) <u></u>	
Date of Birth/Age	17 Sept. 1971	(month) <u>Sept.</u>	(year) <u>1971</u>	20 Dec. 1970	(month) <u>Dec.</u>	(year) <u>1970</u>	
Place of Birth	Quilib, Rosario, Batangas			PEÑASCO, Mataasnakahoy, Batangas			
Sex (Male or Female)	Male			Female			
Citizenship	Filipino			Filipino			
Residence	Quilib, Rosario, Batangas			Brgy. IV, Mataasnakahoy, Batangas			
Religion	R. Catholic			R. Catholic			
Civil Status	Single			Single			
Name of Father	Enrique Castillo (dec.)			Antonio Morada			
Citizenship	Filipino			Filipino			
Name of Mother	Victoria Capanay			Luisita Vergara			
Citizenship	Filipino			Filipino			
Persons who gave consent or advice	of legal age			of legal age			
Relationship							
Residence							

Place of Marriage

Mataasnakahoy, Catholic Church

(Office of the House of Barangay or Church or Mosque of
Brgy. IIWA, Mataasnakahoy, Batangas)Date: 20 Dec. 1997 Address: Time: 10:00 A.M.
(day) (month) (year)

Lamberto C. Castillo

THIS IS TO CERTIFY: THAT I, Lorenzo V. Morada, both of legal age, of our own free will and accord, and in the presence of the person solemnizing this marriage and of the witnesses named below, take each other as husband and wife and certifying further that we:

- have not entered into a marriage settlement
 have entered into a marriage settlement, a copy of which is hereto attached.

20th IN WITNESS WHEREOF, we have marked with our finger print, this certificate in quadruplicate this day of December, 1997.LAMBERTO C. CASTILLOLorenzo V. MORADA

(Signature of Husband)

(Signature of Wife)

THIS IS TO CERTIFY: THAT BEFORE ME, on the date and place above-written, personally appeared the above-mentioned parties, with their mutual consent, lawfully joined together in marriage which was solemnized by me in the presence of the witnesses named below, all of legal age.

I CERTIFY FURTHER THAT:

2208216 issued on December 1, 1997 at

- Mataasnakahoy, Batangas in favor of said parties, was exhibited to me.
 no marriage license was necessary, the marriage being solemnized under Art. _____ of Executive Order No. 300.
 the marriage was solemnized in accordance with the provisions of Presidential Decree No. 1663.

REV. FR. John C. Fullilahn
(Signature of Authorizing Officer)

Guest Priest

(Position/Designation)

Authorization no. 97-2356-99 Expiration 1999
(Religious Affiliation, Registry No. and Expiration Date, if applicable)

WITNESSES

(Print Name and Sign)

Rev. Fr. John C. Fullilahn Marilou G. VergaraDanilo SombrañoNora Magpantay Marilou G. VergaraMarilou G. Vergara

06444-A6-105JLB-00893-MI002

BEST POSSIBLE IMAGE



T105064441050089308232017002

Documentary
Stamp Tax Paid

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

ML600085826