

CS Form No. 33-A  
Revised 2018



Republic of the Philippines  
Province of Batangas  
MUNICIPALITY OF MATAASNAKAHOY



Mr. ARNEL D. FLORO

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

Permanent status at the Office of the Mayor (Business Permits and Licensing Section) with a compensation  
(Permanent, Temporary, etc.) (Office/Department/Unit)

rate of Nine Thousand Three Hundred 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. 24.  
(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

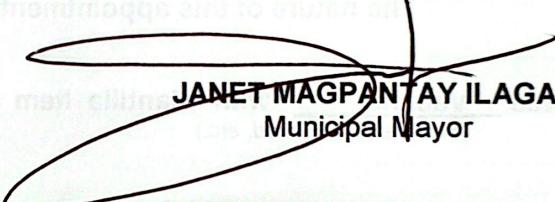
This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

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.

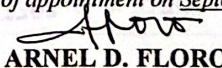
  
**JANET MAGPANTAY ILAGAN**  
Municipal Mayor

## 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*  
  
**ARNEL D. FLORO**  
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 () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBRIVIATE.

1 GS ID No.

(Do not fill up. For CSC use only)

## **I PERSONAL INFORMATION**

2. SURNAME	FLORO		
FIRST NAME	ARNEL		
MIDDLE NAME	DELA VEGA		
3. DATE OF BIRTH (mm/dd/yyyy)	12/27/1977	16. CITIZENSHIP	
4. PLACE OF BIRTH	TONDO MANILA	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	If holder of dual citizenship, please indicate the details.	
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:		
7. HEIGHT (m)	1.65	17. RESIDENTIAL ADDRESS	
8. WEIGHT (kg)	60	#06	J. HERNANDEZ STREET
9. BLOOD TYPE	O	House/Block/Lot No.	Street
10. GSIS ID NO.	N/A	N/A	Brgy 1
11. PAG-IBIG ID NO.	N/A	Subdivision/Village	Barangay
12. PHILHEALTH NO.	09-025545486-1	MATAASNAKAHOY	BATANGAS
13. SSS NO.	3465259794	City/Municipality	Province
14. TIN NO.	345-914-679	ZIP CODE	4223
15. AGENCY EMPLOYEE NO.	OMN038	18. PERMANENT ADDRESS	
		#06	J. HERNANDEZ STREET
		N/A	Street
		Subdivision/Village	Brgy 1
		MATAASNAKAHOY	Barangay
		City/Municipality	BATANGAS
		ZIP CODE	4223
		19. TELEPHONE NO.	
		N/A	
		20. MOBILE NO.	
		09776297370	
		21. E-MAIL ADDRESS (if any)	
		floroarnel12@gmail.com	

## **II. FAMILY BACKGROUND**

22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	STEVEN JOSEPH R.FLORO	9/28/2017
MIDDLE NAME	N/A		SIMON SYGFRID R.FLORO	3/16/2019
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	FLORO			
FIRST NAME	NELSON	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	MASANGKAY			
25. MOTHER'S MAIDEN NAME	DELA VEGA			
SURNAME	FLORO			
FIRST NAME	AMELIA			
MIDDLE NAME	LAGERA		(Continue on separate sheet if necessary)	

*(Continue on separate sheet if necessary)*

### **III. EDUCATIONAL BACKGROUND**

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 (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
				From	To			
ELEMENTARY		SAN FELIPE ELEMENTARY SCHOOL	PRIMARY	1987	1993	GRADUATE	1993	N/A
SECONDARY		LA PURISIMA ACADEMY	HIGH SCHOOL	1993	2000	GRADUATE	2000	N/A
VOCATIONAL/ TRADE COURSE		N/A	N/A					
COLLEGE		N/A	N/A					
GRADUATE STUDIES		N/A	N/A					

*(Continue on separate sheet if necessary)*

**SIGNATURE**

Akron

DATE

SEPTEMBER 8, 2022

**IV. CIVIL SERVICE ELIGIBILITY**

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	has RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE NUMBER	V.L.
				N/A	N/A
— NOTHING FOLLOWS —					
(Continue on separate sheet if necessary)					

**V. WORK EXPERIENCE**

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

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						
1/4/2022	TO PRESENT	Clerical Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER	NO
7/5/2022	12-29-2021	Clerical Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER	NO
1/5/2021	6/30/2021	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER	NO
7/1/2020	12/29/2020	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,300.00	N/A	JOB ORDER	NO
1/5/2020	6/30/2020	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,300.00	N/A	JOB ORDER	NO
7/10/2019	12-29-2019	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	4,500.00	N/A	JOB ORDER	NO
1/14/2019	6/30/2019	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	4,500.00	N/A	JOB ORDER	NO

— NOTHING FOLLOWS —

(Continue on separate sheet if necessary)

SIGNATURE

DATE

SEPTEMBER 8.2022

*(Continue on separate sheet if necessary)*

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

**(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)**

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS <small>(Write in full)</small>	INCLUSIVE DATES OF ATTENDANCE <small>(mm/dd/yyyy)</small>		NUMBER OF HOURS	Type of LD <small>(Managerial/ Supervisory/ Technical/etc.)</small>	CONDUCTED/ SPONSORED BY <small>(Write in full)</small>
	From	To			
DTI Negosyo Center latest Trends in Technology for Msmes	3/24/2022	3/24/2022	4.0	Managerial	DTI-Lipa
Skill Training Program in Basic Computer Hardware Servicing	3/8/2010	3/19/2010	80.0	Technical	Local Government of Cuenca

— NOTHING FAILS —

**(Continue on separate sheet if necessary)**

## **VIII. OTHER INFORMATION**

(Continues on separate sheet if necessary)

**SIGNATURE**

*Show*

DATE

SEPTEMBER 8, 2022

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, 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 <p>If YES, give details: N/A</p>
<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 <p>If YES, give details: N/A</p> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <p>If YES, give details: Date Filed: N/A Status of Case/s: N/A</p>
<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 <p>If YES, give details: N/A</p>
<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO <p>If YES, give details: Close Company</p>
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?  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 type="checkbox"/> NO <p>If YES, give details: N/A</p> <input type="checkbox"/> YES <input type="checkbox"/> NO <p>If YES, give details: N/A</p>
<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 <p>If YES, give details (country): N/A</p>
<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 items:</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 <p>If YES, please specify: N/A</p> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <p>If YES, please specify ID No: N/A</p> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <p>If YES, please specify ID No: N/A</p>

41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
Rodante G. De Leon	Mataasnakahoy, Batangas	9175798863
Maribel L. Matibag	Mataasnakahoy, Batangas	9270533559
Melandro D. Floro	Mataasnakahoy, Batangas	9179769371

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 (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID: National Identification	
ID/License/Passport No.: 4809-6238-1469-3026	
Data/Place of Issuance: 05-31-2022	

Signature (Sign inside the box)
September 8, 2022
Date Accomplished

SUBSCRIBED AND SWORN to before me this 08th day of Sept. 2022, affiant exhibiting his/her validly issued government ID as indicated above.

GALLY D. TIPAN
OIC-Municipal Human Resources Management Officer

CS Form No. 33-A  
Revised 2018



Republic of the Philippines  
Province of Batangas  
**MUNICIPALITY OF MATAASNAKAHOY**

Mr. ARNEL D. FLORO

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(Position Title)

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(Office/Department/Unit)

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who was Vacant with Plantilla Item No. 24.  
(Transferred, Retired, etc.)

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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

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

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**JANET MAGPANTAY ILAGAN**  
Municipal Mayor

## CSC Notation

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

## Acknowledgement

*Arnel D. Floro*  
**ARNEL D. FLORO**  
Appointee

# PERSONAL DATA SHEET

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Print legibly. Tick appropriate boxes () and 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)

## II. PERSONAL INFORMATION

2. SURNAME	FLORO		
FIRST NAME	ARNEL	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	DELA VEGA		
3. DATE OF BIRTH (mm/dd/yyyy)	12/27/1977	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country: ▼
4. PLACE OF BIRTH	TONDO MANILA	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	#08 J. HERNANDEZ STREET House/Block/Lot No. Street N/A Brgy 1 Subdivision/Village Barangay MATAASNAKAHOY BATANGAS City/Municipality Province 4223
7. HEIGHT (m)	1.65	ZIP CODE	
8. WEIGHT (kg)	60		
9. BLOOD TYPE	O	18. PERMANENT ADDRESS	#08 J. HERNANDEZ STREET Street N/A Brgy 1 Subdivision/Village Barangay MATAASNAKAHOY BATANGAS City/Municipality Province 4223
10. GSIS ID NO.	N/A	ZIP CODE	
11. PAG-IBIG ID NO.	N/A		
12. PHILHEALTH NO.	09-025545486-1	19. TELEPHONE NO.	N/A
13. SSS NO.	3465259794	20. MOBILE NO.	09778297370
14. TIN NO.	345-914-679	21. E-MAIL ADDRESS (if any)	<a href="mailto:floroarnel12@gmail.com">floroarnel12@gmail.com</a>

## II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A	23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	STEVEN JOSEPH R.FLORO
MIDDLE NAME	N/A	N/A	9/28/2017
OCCUPATION	N/A		
EMPLOYER/BUSINESS NAME	N/A		
BUSINESS ADDRESS	N/A		
TELEPHONE NO.	N/A		
24. FATHER'S SURNAME	FLORO		
FIRST NAME	NELSON	NAME EXTENSION (JR., SR)	
MIDDLE NAME	MASANGKAY	N/A	
25. MOTHER'S MAIDEN NAME	DELA VEGA		
SURNAME	FLORO		
FIRST NAME	AMELIA		
MIDDLE NAME	LAGERA		
(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 (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	SAN FELIPE ELEMENTARY SCHOOL	PRIMARY	1987	1993	GRADUATE	1993	N/A
SECONDARY	LA PURISIMA ACADEMY	HIGH SCHOOL	1993	2000	GRADUATE	2000	N/A
VOCATIONAL/ TRADE COURSE	N/A	N/A					
COLLEGE	N/A	N/A					
GRADUATE STUDIES	N/A	N/A					
(Continue on separate sheet if necessary)							

SIGNATURE

DATE

SEPTEMBER 8, 2022

**IV. CIVIL SERVICE ELIGIBILITY**

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	imme RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (If applicable)	
				NUMBER	L VALUE
N/A		N/A	N/A	N/A	N/A
— NOTHING FOLLOWS —					
<i>(Continue on separate sheet if necessary)</i>					

**V. WORK EXPERIENCE**
*(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.*

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' y INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To					
1/4/2022	TO PRESENT	Clerical Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER
7/5/2022	12-29-2021	Clerical Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER
1/5/2021	6/30/2021	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,500.00	N/A	JOB ORDER
7/1/2020	12/29/2020	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,300.00	N/A	JOB ORDER
1/5/2020	6/30/2020	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	6,300.00	N/A	JOB ORDER
7/10/2019	12-29-2019	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	4,500.00	N/A	JOB ORDER
1/14/2019	6/30/2019	Licencing Aide	BUSINESS PERMITS & LICENCING SECTION	4,500.00	N/A	JOB ORDER

— NOTHING FOLLOWS —

*(Continue on separate sheet if necessary)*
**SIGNATURE**
**DATE**

SEPTEMBER 8.2022



<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, 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: <u>N/A</u>
<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: <u>N/A</u> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: Date Filed: <u>N/A</u> Status of Case/s: <u>N/A</u>
<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: <u>N/A</u>
<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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <u>Close Company</u>
<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 type="checkbox"/> NO If YES, give details: <u>N/A</u> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: <u>N/A</u>
<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): <u>N/A</u>
<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 items:</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: <u>N/A</u> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: <u>N/A</u> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: <u>N/A</u>

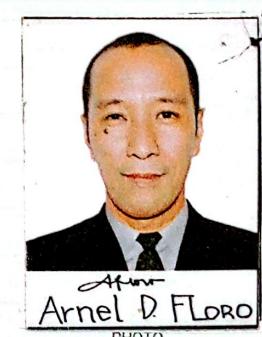
41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)

NAME	ADDRESS	TEL. NO.
Rodante G. De Leon	Mataasnakahoy, Batangas	9175798863
Maribel L. Matibag	Mataasnakahoy, Batangas	9270533559
Melandro D. flor0	Mataasnakahoy, Batangas	9179769371

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 (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID: National Identification	
ID/License/Passport No.: 4809-6238-1469-3026	
Date/Place of Issuance: 05-31-2022	


Signature (Sign inside the box)
September 8, 2022
Date Accomplished



SUBSCRIBED AND SWORN to before me this 08th day of Sept. 2022, affiant exhibiting his/her validly issued government ID as indicated above.


GALLY B. TIPAN
OIC-Municipal Human Resources Management Officer



Republic of the Philippines  
Province of Batangas  
**MUNICIPALITY OF MATAASNAKAHOY**

**C E R T I F I C A T I O N**

TO WHOM IT MAY CONCERN:

This is to certify that in connection with the appointment of Mr. ARNEL D. FLORO as Administrative Aide I (Utility Worker I) in the Office of the Mayor (Business Permits and Licensing Section) 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**

**C E R T I F I C A T I O N**

**THIS IS TO CERTIFY** that funds are available for the position of Administrative Aide I (Utility Worker I) in the Office of the Mayor (Business Permits and Licensing Section) 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

24

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 (Business Permits and Licensing Section)

7. DEPARTMENT / BRANCH / DIVISION

8. WORKSTATION / PLACE OF WORK

Office of the Mayor (Business Permits and Licensing  
Section)

Office of the Mayor (Business Permits and Licensing Section)

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

P 9,388.00

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

Municipal Mayor

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 / Managerial	<input type="checkbox"/>	<input type="checkbox"/>	General Public	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supervisors	<input type="checkbox"/>	<input type="checkbox"/>	Other Agencies	<input type="checkbox"/>	<input type="checkbox"/>
Non-Supervisors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Others (Please Specify):		
Staff	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

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.

**20. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE POSITION (Job Summary)**

Maintain cleanliness and orderliness of the workplace and does other related work.

**21. QUALIFICATION STANDARDS**

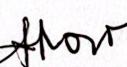
21a. Education	21b. Experience	21c. Training	21d. Eligibility
Must be able to read and write	None Required	None Required	None Required (MC 11, s. 96-Cat III)
<b>21e. Core Competencies</b>			<b>Competency Level</b>
None Yet			None Yet
<b>21f. Leadership Competencies</b>			<b>Competency Level</b>
None Yet			None Yet

**22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)**

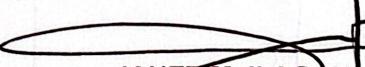
Percentage of Working Time	(State the duties and responsibilities here.)	
15%	Maintain the cleanliness and orderliness in the office	
10%	Arrange various decorations in the office	
15%	Assists the applicants in securing business permit	
15%	Assists in the monitoring of business establishments in the municipality	
15%	Assist in the inspection of business establishment and see to it that it complies with the establishment laws, regulations and ordinances.	None Yet
5%	Answering telephone calls	
5%	Filing of incoming and outgoing communications	
5%	May be assigned to run errands from time to time	
5%	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.

  
ARNEL D. FLORO 9/16/22

Employee's Name, Date and Signature

 JANET M. ILAGAN 9/16/22

Municipal Mayor, Date and Signature



Republic of the Philippines  
Province of Batangas  
**Municipality of Mataasnakahoy**

## OATH OF OFFICE

I, ARNEL D. FLORO of Brgy. I, 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.

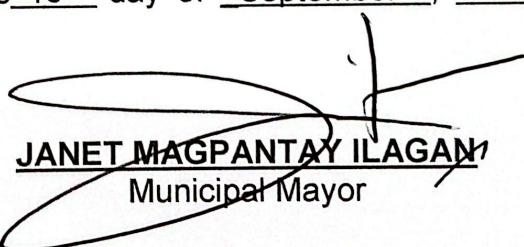
SO HELP ME GOD.

  
ARNEL D. FLORO

(Signature over Printed Name of the Appointee)

Government ID: National ID  
ID Number : 4809-6238-1469-3026  
Date Issued : 05/31/2022

Subscribed and sworn to before me this 16<sup>th</sup> 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 Mr. ARNEL D. FLORO has assumed the duties and responsibilities as Administrative Aide I (Utility Worker I) in the Office of the Mayor (Business Permits and Licensing Section) effective September 16, 2022.

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

Done this 16<sup>th</sup> 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



*La Purisima*  
CONCEPCION ACADEMY  
Formerly Matanzas High School  
Concordia, Calif., U.S.A.

## **STUDENT'S PERMANENT RECORD**

NAME : FLORO, ARNEL DELA VEGA SEX : MALE  
DATE OF BIRTH : DECEMBER 27, 1977 PLACE OF BIRTH : CALOOCAN CITY  
PARENT / GUARDIAN : AMELIA FLORO OCCUPATION: HOUSEKEEPER  
ELEMENTARY COURSE COMPLETED: SAN FELIPE ELEMENTARY SCHOOL SCHOOL YEAR : 1992 - 1993  
TOTAL NUMBER OF YEARS IN SCHOOL TO COMPLETE THE COURSE : 6 GENERAL AVERAGE :

**Total Number of Years in School to Date:** 7

SUMMER CLASSES:	SCHOOL:
<b>Days of School</b>	
<b>Days of Present</b>	

YEAR : SECOND SCHOOL : CUENCA INSTITUTE S.Y.		1994-1995		
SUBJECTS		FINAL RATING	ACTION TAKEN	CREDITS EARNED
Filipino	II	76	P	1
Social Studies	II	75	P	1
Physical Education , Health and Music	II	92	P	1
Values Education	II	77	P	1
English	II	73	Fd	0
Science and Technology	II	75	P	2
Mathematics	II	72	Fd	0
Technology and Home Economics	II	83	P	2

<b>Days in School</b>			<b>200</b>
<b>Days of Present</b>			<b>186</b>

**Total Number of Years in School to Date:**

SUMMER CLASSES:		1995	SCHOOL:	LCC
ENGLISH	II	75	P	1
MATHEMATICS	II	75.4	P	1
Days of School				42
Days of Present				40

YEAR : FOURTH SCHOOL :		L.P.C.A.	S.Y.	1997-1998
SUBJECTS		FINAL RATING	ACTION TAKEN	CREDITS EARNED
Filipino	IV	76	P	1
Social Studies	IV	75	P	1
Physical Education , Health and Music	IV	80	P	1
Values Education	IV	85	P	1
English	IV	75	P	1
Science and Technology	IV	72	Fd	0
Mathematics	IV	72	Fd	0
Technology and Home Economics	IV	79	P	2
Computer	IV	76	P	0
STATISTICS		75	P	0
Mathematics	III	70	Fd	0

<b>Days in School</b>			205
<b>Days of Present</b>			195

Total Number of Years in School to Date: 10

SUMMER CLASSES:	SCHOOL:			
<b>Days of School</b>				
<b>Days of Present</b>				

**CERTIFICATE OF TRANSFER**

I certify that this is the true record of  
This student, on this \_\_\_\_\_ day of \_\_\_\_\_, **THE ORIGINAL**,  
year as (a regular / an irregular) student and has no property responsibility.

2022 eligible for transfer and admission to the

**ARNEL V. FLORO**

I certify that this is the true record of

on this day of

**regular / an irregular ) student and has no ~~right~~ THE ORIGINAL**

**CERTIFICATE** and has no property responsibility in this school.

MYRTA D. L. LITT REGISTRATION

09/07/2022

**ARNEL V. FLORO**

Principles



**STUDENT'S PERMANENT RECORD**

NAME :

FLORO, ARNEL DELA VEGA

SEX :

MALE

DATE OF BIRTH : DECEMBER 27, 1977

PLACE OF BIRTH :

CALOOCAN CITY

PARENT / GUARDIAN :

AMELIA FLORO

OCCUPATION:

HOUSEKEEPER

ELEMENTARY COURSE COMPLETED:

SAN FELIPE ELEMENTARY SCHOOL

SCHOOL YEAR : 1992 - 1993

TOTAL NUMBER OF YEARS IN SCHOOL TO COMPLETE THE COURSE :

6

GENERAL AVERAGE :

YEAR : FOURTH SCHOOL : L.P.C.A. S.Y. 1998-1999

SUBJECTS	FINAL RATING	ACTION TAKEN	CREDITS EARNED
Filipino IV			
Social Studies IV			
Physical Education , Health and Music IV			
Values Education IV		DROPPED;	
English IV		15 July, 1998	
Science and Technology IV			
Mathematics IV			
Technology and Home Economics IV			
Days in School			
Days of Present		19	

Total Number of Years in School to Date:

SUMMER CLASSES:	1999	SCHOOL:	L.P.C.A.
MATHEMATICS III	75	P	1
Days of School			40
Days of Present			37

YEAR : FOURTH SCHOOL : L.P.C.A. S.Y. 1999-2000

SUBJECTS	FINAL RATING	ACTION TAKEN	CREDITS EARNED
Filipino IV		TAKEN	
Social Studies IV		TAKEN	
Physical Education , Health and Music IV		TAKEN	
Values Education IV		TAKEN	
English IV		TAKEN	
Science and Technology IV	75	P	2
Mathematics IV	75	P	1
Technology and Home Economics IV		TAKEN	
Days in School			205
Days of Present			203

Total Number of Years in School to Date: 8

SUMMER CLASSES:	SCHOOL:



**CERTIFICATE OF TRANSFER**

I certify that this is the true record of

This student, on this 7th day of SEPTEMBER, 2022, eligible for transfer and admission to the

COLLEGE

year as ( a regular / an irregular ) student and has no property responsibility in this school.

'COPY FOR EMPLOYMENT.'

ARNEL V. FLORO

DEXTER VERGARA ALVIS

Principal





FORM NO. 102—(Revised Dec. 1, 1958)

(TO BE ACCOMPLISHED IN DUPLICATES)

## REPUBLIC OF THE PHILIPPINES

## CERTIFICATE OF LIVE BIRTH

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

Register Number:

(a) Civil Registrar-General No.

(b) Local Civil Registrar No. 323 (2-78)

Province: \_\_\_\_\_  
City or Municipality: Kalookan City

## 1. PLACE OF BIRTH

a. PROVINCE

b. CITY OR MUNICIPALITY

Kalookan City

c. NAME OF HOSPITAL OR INSTITUTION (If not in hospital, give street address)  
Phil. National Railways Hospital

## 2. USUAL RESIDENCE OF MOTHER (Where does mother live?)

a. PRESENT

b. CITY OR MUNICIPALITY

Tondo, Manila

c. NUMBER AND STREET

2709 Juan Luna St., Gagalangin

## d. Is PLACE OF BIRTH INSIDE CITY LIMITS?

Yes No 

## d. Is RESIDENCE INSIDE CITY LIMITS?

Yes No 

## e. Is RESIDENCE ON A FARM?

Yes No Yes No 

## 3. NAME (Type or print)

First  
AnnelMiddle  
dela VegaLast  
Floro

## 4. SEX

Male

## 5. DATE OF BIRTH

Single

TWIN  TRIPLET 6. If TWIN OR TRIPLET, WAS CHILD  
1ST  2ND  3RD 

## 6. DATE OF BIRTH

Month

Day Year

Dec 27, 1977

## CHILD

FATHER

## MOTHER

## 12. MOTHER'S NAME

## 13. RACE

14. AGE (At time of  
this birth)

Years

25

## 7. NAME

First

Middle

Last

RELIGION

R.Catholic

8. NATIONALITY

Filipino

9. AGE (At time of  
this birth)

Years

21

10. BIRTHPLACE

11a. USUAL OCCUPATION

None

11b. KIND OF BUSINESS OR IN-  
DUSTRY

None

## 11. PARENT'S NAME

## 12. MOTHER'S NAME

## 13. RACE

14. AGE (At time of  
this birth)

Years

21

## 15. BIRTHPLACE

Sampaloc, Manila

## 16. PREVIOUS DELIVERIES

0

17. How many  
children are  
now alive?

0

18. How many other  
children were  
born alive but  
are now dead?

0

## 19. ATTENDANT AT BIRTH

I declare  
hereby  
that I attended the birth of this child who was born  
at 4:00  
o'clock P.M. on the date above indicated

## a. SIGNATURE

Annel V. Floro

## b. NAME IN PRINT

Annel V. Floro

## c. ADDRESS

PNB Hospital, Kalookan City

## d. DATE

1977

## 20. RECEIVED IN THE OFFICE OF THE CIVIL REGISTRAR

## a. SIGNATURE

CITY REGISTRAR

## b. NAME IN PRINT

CITY REGISTRAR

## c. TITLE OR POSITION

ADMINISTRATIVE

## d. DATE

1977

## 21. LENGTH OF PREGNANCY

39-40

## COMPLETED

JAN 1 1978

## 22. DAY OF BIRTH

6

## JAN

## 23. LEGITIMATE

Yes No 

## 24. DATE OF BIRTH

1977

## 25. THIS CERTIFICATE IS PERMANENT

SIGNATURE

NAME IN PRINT

Florencia N. Simbul

TITLED OR POSITION

Immigration Officer

DATE

1977

## 26. SPACE FOR SIGNATURE AND WITNESS FOR SPECIAL PURPOSES

07311-20-105KFM-00938-BI001

BEST POSSIBLE IMAGE

T10507311050093801072020001  
A6800192981BReN  
07501-A77YT09-2Documentary  
Stamp Tax PaidCLAIRE DENNIS S. MAPA, Ph. D.  
National Statistician and Civil Registrar General  
Philippine Statistics Authority

CDM

MEDICAL CERTIFICATE  
(For Employment)

INSTRUCTIONS

- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- 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	
FLORO ARNEZ DELA VEGA		LGU - M-KAHAY	
ADDRESS		BRGY 4 M-KAHAY	
BRGY 1 J. HERNANDEZ ST. M-KAHAY		BATANGAS	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
44	MALE	SINGLE	

FOR THE LICENSED GOVERNMENT PHYSICIAN

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.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PH	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
KARZA M. CARRAN M.D.			
AGENCY/Affiliation of Licensed Government Physician:			
MATAGASNAKAHOY RHU			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
113447			
OFFICIAL DESIGNATION	DATE EXAMINED		
M40	09-15-22		

## MEDICAL CERTIFICATE (For Employment)

### INSTRUCTIONS

- This medical certificate should be accomplished by a licensed government physician.
- Attach this certificate to original appointment, transfer and reemployment.
- 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	
Floro, Arnel dela Vega		LGR MATARAKAHY	
ADDRESS		Brgy 4 MATAKAKAHY BATTARAS	
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
44	Male	Single	

### FOR THE LICENSED GOVERNMENT PHYSICIAN

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.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PH	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
<del>KARLA M. CARAAZ M.D.</del>			
AGENCY/Affiliation of Licensed Government Physician:			
<del>MATAKAKAHY, RHU.</del>			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
13447			
OFFICIAL DESIGNATION		DATE EXAMINED	
MHO			



# 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



1

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PATIENT NAME: **FLORO , ARNEL**  
AGE/SEX: 44 MALE  
REQUESTED BY: MATAAS NA KAHOY , BATANGAS

CASE No: 22- 22  
DATE: JULY 01, 2022

## 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**



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**

CCF No: R202208120187  
Name: FLORO, ARNEL DELA VEGA  
Birthdate: 12/27/1977 Age: 44

Gender: M

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**

<i>Drug/Metabolite</i>	<i>Result</i>	<i>Remarks</i>
METHAMPHETAMINE	NEGATIVE	PASSED
TETRAHYDROCANNABINOL	NEGATIVE	PASSED

**Test Conducted By**

95 KATE JOANNE BULACLAC CABUNGCAL  
*Cabungcal*

**Analyst**

**Approved By**

*Alpha Grace B Cabic*  
DR. ALPHA GRACE B CABIC

59

**Head of Laboratory**

**Valid Within 12 Month/s from Transaction Date**

***This is a DOH-DDB IDTOMIS generated report***



**St. Joseph HealthCare, Inc.**

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

Name: **FLORO, ARNEL**

Patient Pin: **SJHI 87299**

Age : **44** Sex : **MALE**

Company: **WALK IN**

Sample Date: **September 12, 2022**

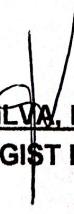
**LABORATORY REPORT**

**CLINICAL MICROSCOPY**

**URINALYSIS**

DESCRIPTION	RESULT	NORMAL VALUE
COLOR	LIGHT YELLOW	
TRANSPARENCY	SLIGHTLY TURBID	
PH	6.0	5.0-8.0
SPECIFIC GRAVITY	1.010	1.005-1.030
SUGAR	NEGATIVE	NEGATIVE
PROTEIN	NEGATIVE	NEGATIVE
White blood cells	0-1/HPF	
RED BLOOD CELLS	0-1/HPF	
A.URATES/PHOSPHATES		
EPITHELIAL CELLS	RARE	
BACTERIA	RARE	
MUCUS THREADS	RARE	
PREGNANCY TEST		

**REMARKS:**

  
**MYKEE L. DE SILVA, RMT**

MEDICAL TECHNOLOGIST LIC# 83300

  
**SPENCER S. WATANABE, MD, FPSP, MHA**

PATHOLOGIST LIC#0112723

Name:	FLORO, ARNEL	Patient Pin:	SJHI87299
Age :	44	Sex :	MALE
		Company:	WALK IN

Sample Date: September 12, 2022

### LABORATORY REPORT

#### HEMATOLOGY

DESCRIPTION	RESULT	REFERENCE VALUES
RBC	5.63	FEMALE : $4.0\text{-}5.4 \times 10^{12}/\text{L}$ MALE : $4.6\text{-}6.0 \times 10^{12}/\text{L}$
Hemoglobin	162	FEMALE : 120-160g/L MALE : 140-180g/L
Hematocrit	0.47	FEMALE : 0.37-0.47 MALE: 0.40-0.54
MCV	83.7	76-100 fL
MCH	28.8	27-32 pg
MCHC	34.4	32-36%
White blood cells	10.8	$5.0\text{-}10.0 \times 10^9/\text{L}$
Segmenters	0.57	0.55-0.68
Lymphocytes	0.34	0.25-0.39
Monocytes	0.08	0.02-0.08
Eosinophils	0.01	0 -0.05
Platelet count	274	$150\text{-}450 \times 10^9/\text{L}$

**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:** ARNEL D. FLORO

**DATE OF EXAM:** 12 Sept. 2022

**AGE:** 44

**CIVIL STATUS:** Single

**HOME ADDRESS:** Mataasnakahoy, Batangas

## EVALUATION REPORT

FACTORS	FINDINGS
Intelligence (Ability to learn & solve problems)	AVERAGE
Educational Attainment	HIGH SCHOOL GRADUATE
Experience (relevance to position)	3 Yrs. JOB ORDER
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	AVERAGE

## SUMMARY

Intelligence Quotient: **90**

Classification: AVERAGE

Percentage Score: **36TH PERCENTILE**

Personality Evaluation: Family-oriented, subject seeks stability and good provision for his family. Apparent responsibility in carrying out his obligations has always been present. Subject finds fulfillment in servicing people and loved ones.

**REMARKS:** Recommended

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Psychologist  
(Accreditation No. 130)