

CERTIFIED TRUE COPY

By: 

Date:

05 JAN 2021

HQP-PFF-039  
(V07, 10/2017)**MEMBER'S DATA FORM  
(MDF)**

FOR Pag-IBIG Fund USE ONLY

Pag-IBIG MID NUMBER

142000501278 ✓

REGISTRATION TRACKING NUMBER

914195950630

OCCUPATIONAL STATUS		EMPLOYED			
MEMBERSHIP CATEGORY		EMPLOYED - PRIVATE			
PERSONAL DETAILS					
	LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME
MEMBER	DANIEL	MARVIN		CAMPO	<input type="checkbox"/>
FATHER	DANIEL	RUBEN		DABLO	<input type="checkbox"/>
MOTHER (Maiden Name)	CAMPO	MA LUISA		MACASA	<input type="checkbox"/>
SPOUSE (if Married)					<input type="checkbox"/>
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	DANIEL	MARVIN		CAMPO	<input type="checkbox"/>
DATE OF BIRTH		MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)	
04/27/1987		Single/Unmarried		SSS NUMBER	
PLACE OF BIRTH		CITIZENSHIP		GSIS NUMBER	
OLONGAPO CITY, ZAMBALES		FILIPINO		223810080	
SEX	HEIGHT(cm.)	WEIGHT(kg.)	PROMINENT DISTINGUISHING FACIAL FEATURES		EMPLOYEE NUMBER
MALE	0.00	0.00			
COMMON REFERENCE NUMBER (CRN)		FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		For AFP/PNP Employee, Serial/Badge No. For DepEd Employee, Division Code-Station Code	

ADDRESS AND CONTACT DETAILS					
PERMANENT HOME ADDRESS				COUNTRY + AREA CODE + TELEPHONE NUMBER	
Unit/Room No., Floor		Building Name		HOME	
				+63 (02) 2918366	
Lot No.	Block No.	Phase No.	House No.	Street Name	CELLPHONE
					+63 (0943) 5434938
Subdivision		Barangay		BUSINESS (DIRECT LINE)	
Municipality/City		Province/State/Country		BUSINESS (TRUNK LINE)	
OLONGAPO CITY		ZAMBALES, PHILIPPINES			
ZIP Code				E-MAIL ADDRESS	
2200				memfmanpower@yahoo.com	
PRESENT HOME ADDRESS					
Unit/Room No., Floor		Building Name		Lot no.	
				Block no.	
				Phase No.	
House No.		Street Name		Subdivision	
				Barangay	
Municipality/City		Province/State/Country		Zip Code	
OLONGAPO CITY		ZAMBALES, PHILIPPINES		2200	
PREFERRED MAILING ADDRESS		EMPLOYER/BUSINESS ADDRESS			

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.

PRESENT EMPLOYMENT DETAILS						
OCCUPATION HELPERS PRODUCTION WORKERS			EMPLOYMENT STATUS CONTRACTUAL	TYPE OF WORK		
EMPLOYER/BUSINESS NAME IAMM MANPOWER SERVICES INC			COUNTRY OF ASSIGNMENT			
EMPLOYER/BUSINESS ADDRESS Unit/Room No., Floor Building Name			MANNING AGENCY			
Lot No.	Block No.	Phase No.	House No.	Street Name	MONTHLY INCOME	
Subdivision Barangay MALANDAY					Basic	9,000.00
					Allowances/Others	0.00
					Total Mo. Income	9,000.00
Municipality/City VALENZUELA CITY			Province	OFFICE ASSIGNMENT		
State/Country(if abroad) PHILIPPINES			ZIP Code 1444	DATE EMPLOYED JUN 2014		

PREVIOUS EMPLOYMENT FROM DATE OF Pag-IBIG Fund MEMBERSHIP		
EMPLOYER/BUSINESS NAME	OFFICE ASSIGNMENT	
EMPLOYER/BUSINESS ADDRESS	FROM	TO

HEIRS					
LASTNAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	NO MIDDLE NAME RELATIONSHIP	DATE OF BIRTH
[ ]					

I HEREBY CERTIFY THAT THE INFORMATION GIVEN AND ALL STATEMENTS MADE HEREIN ARE TRUE AND CORRECT.	
SIGNATURE OF MEMBER	DATE

FOR Pag-IBIG FUND USE ONLY			
RECEIVED BY	DATE		
Signature over Printed Name	Designation/Position	Branch/Unit	

**DISCLAIMER**

Membership registration with the Fund does not automatically qualify a Pag-IBIG member to avail of the Fund's various loan programs. A Pag-IBIG member must satisfy the eligibility requirements and comply with the documentary requirements, which is subject to verification and approval.