THE PROPERTY.	Philippine Health Insurance Corporation					
DATE 02/28/2	2019	NO. 7	95771	10		
Received from	m: HMP CO					
Reference:	Reference: FORMAL PRIVATE SECTOR					
or Name . H	FURMALPR	IVATE SECT	OR			
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Zip Code:	Te	l. No.:		Tibe		
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NSURANCE CORPORATION
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SPA No. : Applicable Period : Document Control Number : Date/Time Generated : Date Received : Report Type : SPA100016773880 01-2019 01301000204479577110 03/19/2019 08:49:11 03/01/2019 09:00:48 Regular

EMITTANCE REPORT

Middle Name	PS	ES	Status Remarks
TOD	137.50	137.50	A
E	137.50	137.50	A
PUSAN	137.50	137.50	A
LITAN	137.50	137.50	A
DLO	137.50	137.50	A
Subtotal	687,50	687.50	
GRAND TOTAL			

ttance Report. Certification of employer is not required.

PHILIPPINE HEALTH INSURANCE CORPORATION www.philhealth.gov.ph

SPA100016773880 01-2019 01301000204479577110 03/19/2019 08:49:11 03/01/2019 09:00:48 Regular

EMPLOYER'S REMITTANCE REPORT

PhilHealth Number: 013010002044
Employer Name: HMP CO
Employer Address: SOGOD SOUTHERN LEYTE
Employer TIN: 010210740
Employer Type: Private

Vo.	PhilHealth No.	Surname	Given Name	Middle Name	PS	ES	Status Remark
1	132517392239	AYSO	MARIA ELENA	PONTOD	137.50	137.50 A	
2	010254416032	DELGADO	JULIA	SARTE	137.50	137.50 A	
3	132516960632	FERNANDEZ	DAVE	LAMPUSAN	137.50	137.50	
4	130501999505	POL	SYRA	CAPILITAN	137.50	137.50 A	
5	132024223861	ZABLAN	JASON LEE	GALOLO	137.50	137.50 A	
				Subtotal	687.50	687.50	
				GRAND TOTAL		1,375.00	

This is an EPRS generated Employer Remittance Report. Certification of employer is not required