



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**  
Citystate Centre Building, 709 Shaw Boulevard, Pasig City  
Healthline: 441-7444 Website: [www.philhealth.gov.ph](http://www.philhealth.gov.ph)

**STATEMENT OF PREMIUM ACCOUNT (SPA) - FORMAL SECTOR**

Date generated : February 17, 2020

PEN: **016000000597**  
Employer Type : **PRIVATE**  
Business/Agency Name : **JOYFUL ASSEMBLY OF GOD CHURCH, INC.**

**SPA100020886351**



Group Name :

**CURRENT CHARGES :**

Applicable Month : January 2020  
No. of Employees : 2

Amount of Premium:  
Employee Share : 450.00  
Employer Share : 450.00

Premium Due for the Current Applicable Period

900.00

**EMPLOYER'S COPY**



**TOTAL AMOUNT DUE**

**900.00**

**Due Date:**  
**Please Pay Immediately**

**IMPORTANT REMINDER**

Per available records, it appears that your account has deficiencies as follows:

Reference	Deficiency	Applicable Month/s	Amount
SPA100012313144	No Premium payment	Dec 2017	1,850.00
SPA100015001684	No Premium payment	Aug 2018	1,575.00
SPA100015351401	No Premium payment	Sep 2018	1,375.00
SPA100019809585	No Premium payment	Oct 2019	825.00
SPA100020414758	No Premium payment	Dec 2019	825.00

Please settle the above deficiencies immediately as indicated. All reports must be posted within five (5) days after payment.  
For assistance, coordinate with the PAIMS assigned to your account or visit the nearest PhilHealth Office. Thank you.

Cut here

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