GOVERNMENT CORPORATION INFORMATION SHEET (GCIS) FOR THE YEAR 2021

GENERAL INSTRUCTIONS:

- 1. FOR-GOVERNMENT CORPORATION: THIS GCIS SHOULD BE SUBMITTED WITHIN THIRTY (30) CALENDAR DAYS FROM THE DATE OF RELEASE OF MEMORANDUM CIRCULAR NO. 3 AND SUBSEQUENTLY THEREAFTER, 30 DAYS FROM THE DATE OF THE STOCKHOLDERS' MEETING. DO NOT LEAVE ANY ITEM BLANK. WRITE "N.A." IF THE INFORMATION REQUIRED IS NOT APPLICABLE TO THE GOVERNMENT CORPORATION OR "NONE" IF THE INFORMATION IS NON-EXISTENT.
- 2. IF NO MEETING IS HELD, THE CORPORATION SHALL SUBMIT THE GCIS TOGETHER WITH AN AFFIDAVIT OF NON-HOLDING OF MEETING WITHIN THIRTY

 (30) CALENDAR DAYS FROM THE DATE OF THE SCHEDULED ANNUAL MEETING (AS PROVIDED IN THE BY-LAWS). HOWEVER, SHOULD AN ANNUAL STOCKHOLDERS' MEETING BE HELD THEREAFTER, A NEW GCIS SHALL BE SUBMITTED/FILED.
- 3. THIS GCIS SHALL BE ACCOMPLISHED IN ENGLISH AND CERTIFIED AND SWORN TO BY THE CORPORATE SECRETARY OF THE GOVERNMENT CORPORATION.
- 4. THE GCG SHOULD BE TIMELY APPRISED OF RELEVANT CHANGES IN THE SUBMITTED INFORMATION AS THEY ARISE. FOR CHANGES RESULTING FROM ACTIONS THAT AROSE BETWEEN THE ANNUAL MEETINGS, THE GOVERNMENT CORPORATION SHALL SUBMIT ONLY THE AFFECTED PAGE OF THE GCIS THAT RELATES TO THE NEW INFORMATION TOGETHER WITH A COVER LETTER SIGNED BY THE CORPORATE SECRETARY OF THE GOVERNMENT CORPORATION. THE PAGE OF THE GCIS AND COVER LETTER SHALL BE SUBMITTED WITHIN SEVEN (7) DAYS AFTER SUCH CHANGE OCCURRED OR BECAME EFFECTIVE.
- 5. SUBMIT A SOFT COPY IN EXCEL FORMAT SAVED IN A NON-REWRITABLE CD THE GCIS TO THE GCG SECRETARIAT, ROOM 479 MABINI HALL, MALACANANG COMPOUND.
- 6. ONLY THE GCIS ACCOMPLISHED IN ACCORDANCE WITH THESE INSTRUCTIONS SHALL BE CONSIDERED AS HAVING BEEN FILED.
- 7. THIS GCIS MAY BE USED AS EVIDENCE AGAINST THE GOVERNMENT CORPORATION AND ITS RESPONSIBLE DIRECTORS/OFFICERS FOR ANY VIOLATION OF EXISTING LAWS, RULES AND REGULATIONS

VIOLATION OF EXISTING LAWS, ROLES AND REGULATIONS		
======================================	·	=
GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CEI	NTER .	DATE CREATED:
		_
SECONDARY NAME, <i>IF ANY</i> . OSHC		04-Nov-87
		FISCAL YEAR END: DECEMBER
CHARTER, IF ANY. PD 626,as amended / EO 307		2020
DATE OF ANNUAL MEETING PER BY-LAWS: N/A (monthly meeting)		
		CORPORATE TAX IDENTIFICATION NUMBER (TIN) 004-503-595-000
ACTUAL DATE OF ANNUAL MEETING:		URL ADDRESS:
N/A		www.oshc.gov.ph
COMPLETE PRINCIPAL OFFICE ADDRESS:		
NORTH AVE. COR. SCIENCE ROAD, DILIMAN, QUEZON CITY		E-MAIL ADDRESS
COMPLETE BUSINESS ADDRESS:		oshc.dole.gov.ph FAX NUMBER:
NORTH AVE. COR. SCIENCE ROAD, DILIMAN, QUE	ZON CITY	PAX NOWBER.
NAME OF EXTERNAL AUDITOR & ITS SIGNING PARTNER: N/A	ATTACHED AGENCY (if applicable): N/A	TELEPHONE NUMBER(S):
	IWA	89286690
PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN:		GEOGRAPHICAL CODE:
The Center shall serve as the authority on Occupational Safety and Health in the areas of research, training and information dissemination and technical services		1104
======================================	IONS ==========	
PARENT COMPANY	ADDR	ESS
DEPARTMENT OF LABOR AND EMPLOYMENT	Muralla St., Intramuros, Manila	
SUBSIDIARY/AFFILIATE	ADDR	ESS
N/A	N.A	١.
NOTE: USE ADDITIONAL SHEET	F NECESSARY	

			- -				
GOVERNMENT	CORPORAT	ION NAME: OCCUPATIO		SE PRINT LEGIE			
			CAPIT	AL STRUCTURE			
AUTHORIZED CA	APITAL STOC	K, if applicable					
N/A		TYPE OF SHARES *	NUMBER OF SHARES	PAR/STAT	ED VALUE	AMOUNT (PhP) (No. of shares X Par/States	d Value)
		TOTAL		<u> </u>	TOTAL P		
SUBSCRIBED C	APITAL, if app	licable					
FILIPINO	NO. OF STOCK- HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **	PAR/STATED VALUE	AMOUNT (PhP)	% of Ownership
N/A							
		TOTAL		TOTAL	TOTAL P		
PAID-UP CAPIT	ΓAL, if applic						
FILIPINO	NO. OF STOCK-	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STAT	ED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
			:				
N/A							

		TOTAL			TOTAL P		
							·
		NOTE	E: USE ADDITIO	NAL SHEET IF N	ECESSARY		

			PLEASE PRINT LEGIBLY				a best best and the state of th	
GOVERNMENT CORPORATION NAME:	_	ıtional Safe	ety and He	Occupational Safety and Health Center	·			
			۵	IRECTO	RS / O	FFICERS		
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	PRESIDENTIAL APPOINTEE	BOARD	STOCK HOLDER	E)(-Officio	EXEC. COMM.	TAX IDENTIFICATION NO. (TIN)	COMPENSATION PACKAGEYR	DESIGNATION TO OTHER BOARDS OF AFFILIATES/SUBSIDIARIES
1. SILVESTRE H. BELLO FILIPINO	>	ပ	z	>	ပ	137-345-093	ΝΑ	
2. BENJO SANTOS M. BANAVIDEZ FILIPINO	z	ပ	z	>	O	260-540-162	N/A Chairman-Alternate	
3. NORA M. MALUBAY FILIPINO	Z	×	z	À	N/A	119-342-370	N/A Member-Designate	
4. AURORA CRUZ IGNACIO FILIPINO	Z	Z	z	>	N/A	117-707-571	N/A Member	
5. RIZALDY T. CAPULONG FILIPINO	Z	M	z	>	N/A	182-017-483	N/A Wember-Alternate	
⁶ ELI DINO D. SANTOS FILIPINO	Z	Μ	Z	À	N/A	116-955-629	N/A Member-Alternate	
7: ANGEL L. MIRANDA, J.R. FILIPINO	z	Σ	z	>	N/A	214-435-040	N/A Member-Alternate	
8. CARLITO P. ROBLE FILIPINO, 126 CORDILLERA ST., STA MESA HEIGHTS, Q. C.	γ,	M	z	N/A	M	138-646-331	N/A Member-Designate	
9. STELLA ZIPAGAN BANAWIS FILIPINO, LOT 8 BLK 9 PHASE 4 VISTA VERDE COUNTRY HOMES, CAINTA	>	N	Z	N/A	N	121-005-014	Executive Director/Member	
INSTRUCTIONS: FOR BOARD COLUMN, PUT "C" FOR CHAIRMAN, "W" FOR MEMBER, "" FOR INDEPENDENT DIRECTOR. FOR PRESIDENTIAL APPOINTEE COLUMN, PUT "Y" IF A PRESIDENTIAL APPOINTEE "N" IF NOT. FOR STOCKHOLDER COLUMN, PUT "Y" IF A STOCKHOLDER, "N" IF NOT. FOR STOCKHOLDER COLUMN, INDICATE PARTICULAR POSITION IF AN OFFICER, FROM VP UP INCLUDING THE POSITION OF THE TREASURER, SECRETARY, COMPLIANCE OFFICER AND/OR ASSOCIATED PERSON. FOR EXECUTIVE COMMITTEE, INDICATE "OF THE COMPENSAN AND "M" IF ARABED AND INCLUDING COMMITTEE, ADDITIONALLY WINDER SEARCH OF THE COMPENSAN AND "M" IF ARABED AND INCLUDING COMMITTEE, ADDITIONALLY WINDER. "N" FOR NOMINATION	HAIRMAN, "W" FOR MEI UMN, PUT "Y" IF A PRE I IF A STOCKHOLDER, TICULAR POSITION IF CER AND/OR ASSOCI TE "C" I MEMBER OF	MBER, "" FOR ESIDENTIAL A ESIDENTIAL A ESIDENTIAL A TAN OFFICER ATED PERSON THE COMPEN." A THE COMPEN."	INDEPENDEI PPOINTEE 'P. FROM VP UF A. A. A. H.	NT DIRECTOR. I'I IF NOT. INCLUDING T	HE POSITION (DF THE TREASURER, WITTEE; "N" FOR NOMINATION		-

GCIS (v.2072) AND ELECTION COMMITTEE, INVICALLY WRITE "C" AFTER SLASH IF CHAIRMAN AND "M" IF MEMBER.

PI	FASE	PRIN	IT I EC	BIBLY

DESCRIPTION	NATURE/EXTENT OF INVESTMENT
N/A	N/A
	3000 30000 3

BOARD COMMITTEES	FUNCTION	COMPOSITION
N/A	N/A	N/A
		·

GOVER	NMENT	CORPORA	TION INFORM	iation s	HEET	
		==== PLEASE F	PRINT LEGIBLY ===			
GOVERNMENT CORPORATION NAME:OCCUPATION	ONAL SAFE	TY AND HEALTH	CENTER			
TOTAL NUMBER OF STOCKHOLDERS:	<u> </u>	N/A				·-
TOTAL ASSETS BASED ON LATEST AUDITED FINANC	IAL STATEM	ENTS:	4			
		STOCKHOLDE	R'S INFORMATION			
		SHARE	S SUBSCRIBED		AWOUNT PAID	
NAME, NATIONALITY, <i>IF APPLICABLE</i> AND CURRENT ADDRESS	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP	(PhP), <i>IF</i> <i>APPLICABLE</i>	TAX IDENTIFICATION NO. (TIN) FOR FILIPINOS
1. N/A						
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				-		
2.	+					
3.						
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4.						300000000000000000000000000000000000000
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5.						
			<u> </u>	_		
•						
6.	-		<u> </u>			
				_		
						! \$
7.						
	-					
	TOTAL					
TOTAL AMOUNT OF S	SUBSCRIBE	D CAPITAL				
		TOTAL AM	OUNT OF PAID-UP C	APITAL	·	<u> </u>
ואיפדסו וכדוטאו פנ	DECIEV THE	TOP 20 STOCK	HOLDERS AND INDIC	ATE THE RES	T AS OTHERS	
Note: For PDTC Nominee included in the list please Indi						ocurities Attach sonarate

Note: For PDTC Nominee included in the list, please indicate further the beneficial owners owning more than 5% of any class of the company's voting securities. Attach separate sheet, if necessary.

		===== PLEASE	PRINT LEGIBLY :			
CORPORATE NAME: OCCUPATIONAL SAFETY	Y AND HEA	LTH CENTER				
TOTAL NUMBER OF STOCKHOLDERS:		N/A				
TOTAL ASSETS BASED ON LATEST AUDITED FS:						
,		STOCKHOLDE	R'S INFORMATION			
		SHARES S	SUBSCRIBED			
NAME, NATIONALITY, <i>IF APPLICABLE</i> AND CURRENT ADDRESS	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP	AMOUNT PAID (PhP)	TAX IDENTIFICATION NO. (TIN)
8.						
	TOTAL					
9.						
				-		
	TOTAL					
10.						
				-		
	TOTAL		N 	1		
11.				_		
			 	-		
	TOTAL			-		
12.						
]		
	TOTAL					
13.						
				4		
	TOTAL			1		
14.						
	-			_		1 2 7
	TOTAL			1		*
TOTAL AMOUNT OF S	SUBSCRIBE	D CAPITAL				
		TOTAL AMOI	UNT OF PAID-UP C	APITAL		
INSTRUCTION:	SPECIFY TI	HE TOP 20 STOCKI	HOLDERS AND IND	ICATE THE RE	ST AS OTHERS	

GCIS (v.2012)

GOVERNMENT CORPORATION INFORMATION SHEET PLEASE PRINT LEGIBLY CORPORATE NAME:OCCUPATIONAL SAFETY AND HEALTH CENTER TOTAL NUMBER OF STOCKHOLDERS: N/A TOTAL ASSETS BASED ON LATEST AUDITED FS: N/A STOCKHOLDER'S INFORMATION SHARES SUBSCRIBED NAME, NATIONALITY AND AMOUNT PAID % OF TAX IDENTIFICATION NO. (TIN) AMOUNT **CURRENT RESIDENTIAL ADDRESS** (PhP) TYPE NUMBER OWNER-(PhP) SHIP TOTAL 16. TOTAL 17. TOTAL 18. TOTAL 19. TOTAL 20. TOTAL 21. OTHERS (Indicate the number of the remaining stockholders) TOTAL TOTAL AMOUNT OF SUBSCRIBED CAPITAL TOTAL AMOUNT OF PAID-UP CAPITAL

INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS

GCIS (v.2012)

COLUMN CO					
	EEEEEEE PLE	ASE PRINT LEGIBL	y		
GOVERNMENT CORPORATION NAME: O	CCUPATIONAL SAF	ETY AND HEALTI	I CENTER	dynamical base and the second	;
1. INVESTMENT OF CORPORATE		AMOUNT (F	PhP)	T	N/A
FUNDS IN ANOTHER CORPORATION		, (/		
1.1 STOCKS					-
1.2 BONDS/COMMERCIAL PAPER (Is Private Corporations, IF APPLIC			3200		
1.3 LOANS/ CREDITS/ ADVANCES					
1.4 GOVERNMENT TREASURY BILLS					
1.5 OTHERS					
2. INVESTMENT OF CORPORATE FUNDS SECONDARY PURPOSES (PLEASE SI		DER ITS	DATE OF BO RESOLUTIO		DATE OF STOCKHOLDERS RATIFICATION
3. TREASURY SHARES			NO. OF SHA	RES	% AS TO THE TOTAL NO. OF SHARES ISSUED
4. UNRESTRICTED/UNAPPROPRIATED R	ETAINED EARNING	S AS OF END OF	LAST FISCAL YEAR	₹	
5. DIVIDENDS DECLARED DURING THE					
TYPE OF DIVIDEND			AMOUNT (PhP)		DATE DECLARED
5.1 CASH N/A				•	
5.2 STOCK					
5.3 PROPERTY					
	TOTAL	Р			
6. ADDITIONAL SHARES ISSUED DURING	G THE PERIOD:				
DATE	NO. OF SHARES			AMOU	NT
SECONDARY LICENSE/REGISTRATION V	MITH SEC AND/OD	OTHER GOV'T AG	ENCA.	······································	• • • • • • • • • • • • • • • • • • • •
	SEC		SSP	1	I C
TYPE OF LICENSE/REGN.	NA				/
DATE ISSUED:					
DATE STARTED					
OPERATIONS:					~
TOTAL ANNUAL COMPENSATION DIRECTORS DURING THE PRECEDING YEAR (in PhP)		NO. OF OFFICER	RS TOTAL NO. O		TOTAL MANPOWER COMPLEMENT
A11 10 10 10 10 10 10 10 10 10 10 10 10 1	<u> </u>				A CO DODGE AND AN ENTE
	NOTE: USE ADDITI	ONAL SHEET IF	NECESSARY		60.15. 30.10.00 E. C.
	THE PARTY OF THE P			The same of the sa	

-		==== PLEASE PRINT LEGIBLY =			u	
VERNIMENT CORPOR	RATION NAME: OCCUPATIONAL	GOVERNIMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND MEALTH CENTER				
	SCHEDULE OF CAPITAL EXPENDITURE	XPENDITURE				
PARTICULARS	SECTOR	FOREIGN COMPONENT	NT	NO SUPPORT SUBSIDY	. SUBSIDY	
		Loan	Grant	Project	Тах	Bank loans
∀ Z	¥.	∀	₹	N/A	₹	∀
	Other Source	Total Local Compoonent	Total Cost	Status	-1	and the second
	NA	N/A	NA	N/A		

PLEASE PRINT LEGIBLY ===

GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER

INCOME STATEMENT

For the year : December 31, 2021

	Amount
INCOME	
Business and Service Income (Loading Fund from SSS and GSIS)	226,109,308.44
Gains and Premiums	
Others	
Total Income	226,109,308.44
Less: Share of National Government	34
Income After Share of National Government	
EXPENSES	
Business Expenses	
Personal Services	82,581,437.67
Maintenance and Other Operating Expenses	96,993,160. 38
Financial Expenses	62,691.55
Others (Non-Cash Expenses)	21,506,561.02
Total Expenses	201,143,850.62
Net Income (Loss) Before Subsidy	24,965,457.82
Subsidy Income	0
Net Income (Loss) Before Tax	24,965,457.82
Income Tax Expense (Tax Exempt pusuant to PD 626, as amended)	0
Net Income (Loss) After Tax	24,965,457.82

GOVERNMENT CORPORATION INFORMATION SHEET ====== PLEASE PRINT LEGIBLY ===== GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER **CASH FLOW STATEMENT** For the year ended December 31, 2021 Amount CASH FLOW FROM OPERATING ACTIVITIES Cash Inflows 202,621,864.42 209,823,154.48 Cash Outflows (7,201,290.06) Net Cash Provided By (Used in) Operating Actitives CASH FLOWS FROM INVESTING ACTIVITIES 744,800.33 Cash Inflows 25,853,829.48 Cash Outflows (25, 109, 029. 15) Net Cash Provided By (Used In) Investing Activities CASH FLOWS FROM FINANCING ACTIVITIES Cash Inflows Cash Outflows Net Cash Provided By (Used In) Financing Activities Net Increase (Decrease) in Cash and Cash Equivalents (32,310,319.21) Effects of Exchange Rate Changes on Cash and Cash Equivalents 199,036,919.45 Cash and Cash Equivalents, Beginning of Period

	PLEASE PRINT LEGIE	LY			
GOVERNMENT CORPORATION NAME: OCCUPATION	NAL SAFETY AND HEALT	TH CENTER			
As of December 31, 2021					,
CASH AND INVESTMENT BALANCE REPORT					
	AMOUNT	TERM (No. of Days)	RATE (Per Annum)	DA	NTE
I. Cash on Hand	188,326.29			Issue	Maturity
II. Cash in Banks					
a. Current Account / Savings Account	53,990,195.97				
b. Time Deposit (Landbank) III. Net Depositswith BTr	112,548,077.98				
IV. Special Series (Treasury Bills) with Bangko Sentral (Identify those under trust agreements)					
V. Special Series Placements with BTr (Identify those under trust agreements					
VI. Investments in Other Securities					

170,268,118.32

VII. Others - Investment in Time Deposit

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BALANCE SHEET (For the year December 31, 2021) ASSETS	Amount Amount
	Current Assets
Cash & Cash Equivalents	166,726,600.24
Short-Term Investments	170,268,118.32
Receivables (net)	134,386,862.65
Inventories	7,037,632.23
Prepayments and Deferred Charges	447,888.34
Gross International Reserves	-
Others	
Total Current Assets	478,867,101.78
Non-Curre	
Long -term Receivables (net)	-
Long-term Investments (net)	-
Property, Plan & Equipment (net)	130,901,050.44
Investment Property	-
Intangible Assets	-
Others	545,099.92
Total Non-Current Assets	131,446,150.36
TOTAL ASSETS	610,313,252.14
	LITIES AND EQUITY
	urrent Liabilities
Trade and Non-Trade Payables	75,336,349.36
Current Portion of Long-term Debt	-
Deposit Liabilities	_
Currency in Circulation	_
Securities sold under agreements to repurchase	
Current Liabilities of Water Districts	_
Others	i g
Total Current Liabilities	75,336,349.36
	-Current Liabilities
Deposit Payables	
Bills Payable	
Bonds Payable	
Notes Payable	_
	_
Mortgage Payable	_
Loans and Advances Payable	30,228,040.90
Accrued Retirement Benefits	
Deferred Credits Non-Current Liebilities of Water Districts	
Non-Current Liabilities of Water Districts	
Others	30,228,040.90
Non-Current Liabilities	105,564,390.26
TOTAL LIABILITIES	EQUITY
Coverage of Favilies	249,042,285.00
Government Equity	243,042,263.00
Capital Stock	
Restricted Capital	255,706,576.88
Retained Earnings	200,700,070.88
Others	E04.740.004.00
TOTAL EQUITY	504,748,861.88
TOTAL LIABILITIES AND EQUITY	610,313,252.14

:

PLEASE PRINT LEGIBLY ===== GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER Amount **NET OPERATING INCOME** Schedule 1A Accounts receivable - national government Clients deposit Collection from advances on insured receivables Collection of loans receivables Collection of pari-passu pavables Collection of receivables - loading fund 200,222,803.15 1.494,138,28 Collection of receivables - employees/others Collection of receivables - clients, employees, others 896,327.46 Collection of Sales Contract Receivable (Income) Dividend Income Foreign Exchange gains Gain on sale of Investment Interest and penalties 8,595.53 interest on investments and deposits Lease income (office space) Lease income from acquired assets Lease payment receivable - car plan Miscellaneous deposit Misc inc-service charge Payable to clients/employees/govet agencies Payable to clients/employees/ others Redemption of agrarian reform bonds Reinsurance claims - ECI Reinsurance premium - Trust liabilities Sale of transportation of equipment Sale of unserviceable equipment Add: (other Receipts) fund transfer 202,621,864.42 Total:

202,621,864.42

TOTAL:

*data based on cash flow statement 2020

PLEASE PRINT LEGIBLY ====================================					
GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER					
CHART OF ACCOUNTS					
For the year : 2021					
Net Operating Income					
Sale of Acquired Assets					
Collection of Advances on Guaranteed Loans					
Advances on Guaranteed Loans					
Capital Expenditures					
Dividend Payments					
CASH SURPLUS/DEFICIT					
Operating Receipts					
Sale of goods/services					
Income from commitment and gtee fee					
Filing, processing & amendment fees	`				
Interest Income - Direct lending					
Insurance Premium					
Fund Arrangement Fees					
Add: (Other receipts)	744,800.33				
TOTAL:	744,800.33				
Current Subsidies:					
Carron Capolator.					
Other receipts: (Schedule 1A)	202,621,864.42				
Total Receipts:	203,366,664.75				
Total Receipts.	203,300,004.73				
Less:					
Interest and Financial Charges					
Final Withholding Tax	_				
Prior period expenses	-				
Other current expenditures (PS AND MOOE) actual	209,823,154.48				
(CAPITAL OUTLAY)	25,853,829.48				
Total:	(32,310,319.21)				

I, <u>DIANNE LILIBETH S. BAUTISTA</u>, <u>Corporate Secretary</u> OF THE ABOVE-MENTIONED (NAME) (POSITION)

GOVERNMENT CORPORATION DECLARE UNDER THE PENALTY OF PERJURY, THAT ALL MATTERS SET FORTH IN THIS GOVERNMENT CORPORATION INFORMATION SHEET WHICH CONSISTS OF (17) PAGES HAVE BEEN MADE IN GOOD FAITH, DULY VERIFIED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, ARE TRUE AND CORRECT.

I UNDERSTAND THAT THE FAILURE OF THE CORPORATION TO FILE THIS GIS FOR FIVE (5) CONSECUTIVE YEARS SHALL BE CONSTRUED AS NON-OPERATION OF THE CORPORATION AND A GROUND FOR THE REVOCATION OF THE CORPORATIONS CERTIFICATE OF INCORPORATION. IN THIS EVENTUALITY, THE CORPORATION HEREBY WAIVES ITS RIGHT TO A HEARING FOR THE SAID REVOCATION.

DONE THIS 23rd DAY OF SEPTEMBER, 2022 IN MAKATI CITY.

SUBSCRIBED AND	SWORN TO BEFORE ME IN	MAKATI CITY	CITY/PROVINCE,	PHILIPPINES ON
, AF	FFIANT PERSONALLY APPEARED	BEFORE ME AND EXH	HIBITED TO ME HIS/HER	COMMUNITY TAX
CERTIFICATE NO	ISSUED AT	ON_	, 2022.	
9.61	MOTARY RURL IC EMITTY.G	EORGE/OXUND	LSITE	

DOC. NO: PAGE NO. BOOK NO. SERIES OF 2022: 16

NOTARY PUBLIC FOR TIY. GEORGE CITY/PROVINCE

Notarial Commission No. NOTARY PUBLIC FOR MAKATI CITY

Commission expires on December 31,

Roll of Attorney Number PTR No. IBP No.

Office Address: