

GOVERNMENT CORPORATION INFORMATION SHEET (GCIS)
FOR THE YEAR 2019

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

===== PLEASE PRINT LEGIBLY =====

GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER		DATE CREATED:
SECONDARY NAME, IF ANY: OSHC		4-Nov-87
CHARTER, IF ANY: PD 626, as amended / EO 307		FISCAL YEAR END:
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: N/A		URL ADDRESS: www.oshc.gov.ph
COMPLETE PRINCIPAL OFFICE ADDRESS: NORTH AVE. COR. SCIENCE ROAD, DILIMAN, QUEZON CITY		E-MAIL ADDRESS
COMPLETE BUSINESS ADDRESS: NORTH AVE. COR. SCIENCE ROAD, DILIMAN, QUEZON CITY		oshc.dole.gov.ph FAX NUMBER:
NAME OF EXTERNAL AUDITOR & ITS SIGNING PARTNER: N/A		TELEPHONE NUMBER(S):
ATTACHED AGENCY (if applicable): N/A		89286690
PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN: The Center shall serve as the authority on Occupational Safety and Health in the areas of research, training and information dissemination and technical services		GEOGRAPHICAL CODE: 1104

===== INTERCOMPANY AFFILIATIONS =====

PARENT COMPANY	ADDRESS
DEPARTMENT OF LABOR AND EMPLOYMENT	Muralla St., Intramuros, Manila
SUBSIDIARY/AFFILIATE	ADDRESS
N/A	N.A.

NOTE: USE ADDITIONAL SHEET IF NECESSARY

===== PLEASE PRINT LEGIBLY =====							
GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER							
CAPITAL STRUCTURE							
AUTHORIZED CAPITAL STOCK, <i>if applicable</i>							
N/A	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP) (No. of shares X Par/Stated Value)			
TOTAL				TOTAL P			
SUBSCRIBED CAPITAL, <i>if applicable</i>							
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 CAPITAL, <i>if applicable</i>							
FILIPINO	NO. OF STOCK-	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP)		% OF OWNERSHIP
N/A							
TOTAL				TOTAL	TOTAL P		
NOTE: USE ADDITIONAL SHEET IF NECESSARY							

GOVERNMENT CORPORATION INFORMATION SHEET

===== PLEASE PRINT LEGIBLY =====

GOVERNMENT CORPORATION NAME:								
OCCUPATIONAL SAFETY AND HEALTH CENTER								
DIRECTORS / OFFICERS								
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	PRESIDENTIAL APPOINTEE	BOARD	STOCK HOLDER	EX-Officio	EXEC. COMM.	TAX IDENTIFICATION NO. (TIN)	COMPENSATION PACKAGE/YR	DESIGNATION TO OTHER BOARDS OF: AFFILIATES/SUBSIDIARIES
1. SILVESTRE H. BELLO FILIPINO	Y	C	N	✓	C	137-345-093	N/A	
2. CIRIACO A. LAGUNZAD III FILIPINO	N	N	N	✓	C	117-006-300	N/A Chairman-Alternate	
3. JOJI V. ARAGON FILIPINO	N	N	N	✓	C	169-943-500	N/A Chairman-Alternate	30th September 2019
4. NORA M. MALUBAY FILIPINO	N	M	N	✓	N/A	119-342-370	N/A Member-Designate	
5. AURORA CRUZ IGNACIO FILIPINO	Y	M	N	✓	N/A	117-707-571	MEMBER	28th March 2019
6. ELVIRA A. RESARE FILIPINO	N	M	N	✓	N/A	118-438-058	N/A Member-Designate	
7. RIZALDY T. CAPULONG FILIPINO	N	M	N	✓	N/A	182-016-483	N/A Member-Alternate	17th July 2019
8. DENNIS S. MAS FILIPINO	N	M	N	✓	N/A	199-846-184	N/A Member-Designate	
9. CARLITO P. ROBLE FILIPINO	Y	M	N	N/A	M	138-646-331	N/A Member-Designate	
10. STELLA ZIPAGAN BANAWIS FILIPINO	Y	M	N	N/A	M	121-005-014	Member	
INSTRUCTIONS: FOR BOARD COLUMN, PUT "C" FOR CHAIRMAN, "M" FOR MEMBER, "I" 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 OFFICER 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 "C" IF MEMBER OF THE COMPENSATION COMMITTEE; "A" FOR AUDIT COMMITTEE; "N" FOR NOMINATION AND ELECTION COMMITTEE. ADDITIONALLY WRITE "C" AFTER SLASH IF CHAIRMAN AND "M" IF MEMBER.								

GOVERNMENT CORPORATION INFORMATION SHEET

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER

BOARD COMMITTEES	FUNCTION	COMPOSITION
N/A	N/A	N/A
NOTE: USE ADDITIONAL SHEET IF NECESSARY		

===== PLEASE PRINT LEGIBLY =====

GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER		
LIST OF AFFILIATES/SUBSIDIARIES	DESCRIPTION	NATURE/ EXTENT OF INVESTMENT
N/A	N/A	N/A
NOTE: USE ADDITIONAL SHEET IF NECESSARY		

GOVERNMENT CORPORATION INFORMATION SHEET

===== PLEASE PRINT LEGIBLY =====

GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER

TOTAL NUMBER OF STOCKHOLDERS: N/A

TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS:

STOCKHOLDER'S INFORMATION

NAME, NATIONALITY, IF APPLICABLE AND CURRENT ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP), IF APPLICABLE	TAX IDENTIFICATION NO. (TIN) FOR FILIPINOS
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP		
1. N/A						
2.						
3.						
4.						
5.						
6.						
7.						
	TOTAL					
TOTAL AMOUNT OF SUBSCRIBED CAPITAL						
TOTAL AMOUNT OF PAID-UP CAPITAL						

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

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.

GOVERNMENT CORPORATION INFORMATION SHEET

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CORPORATE NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER						
TOTAL NUMBER OF STOCKHOLDERS:		N/A				
TOTAL ASSETS BASED ON LATEST AUDITED FS:						
STOCKHOLDER'S INFORMATION						
NAME, NATIONALITY, IF APPLICABLE AND CURRENT ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NO. (TIN)
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP		
8.						
	TOTAL					
9.						
	TOTAL					
10.						
	TOTAL					
11.						
	TOTAL					
12.						
	TOTAL					
13.						
	TOTAL					
14.						
	TOTAL					
TOTAL AMOUNT OF SUBSCRIBED CAPITAL						
TOTAL AMOUNT OF PAID-UP CAPITAL						
INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS						

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						
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NO. (TIN)
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP		
15.						
	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						

GOVERNMENT CORPORATION INFORMATION SHEET

===== PLEASE PRINT LEGIBLY =====			
GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER			
1. INVESTMENT OF CORPORATE FUNDS IN ANOTHER CORPORATION	AMOUNT (PhP)	N/A	
1.1 STOCKS			
1.2 BONDS/COMMERCIAL PAPER (Issued by Private Corporations, IF APPLICABLE)			
1.3 LOANS/ CREDITS/ ADVANCES			
1.4 GOVERNMENT TREASURY BILLS			
1.5 OTHERS			
2. INVESTMENT OF CORPORATE FUNDS IN ACTIVITIES UNDER ITS SECONDARY PURPOSES (PLEASE SPECIFY:)	DATE OF BOARD RESOLUTION	DATE OF STOCKHOLDERS RATIFICATION	
3. TREASURY SHARES	NO. OF SHARES	% AS TO THE TOTAL NO. OF SHARES ISSUED	
4. UNRESTRICTED/UNAPPROPRIATED RETAINED EARNINGS AS OF END OF LAST FISCAL YEAR			
5. DIVIDENDS DECLARED DURING THE IMMEDIATELY PRECEDING YEAR:			
TYPE OF DIVIDEND	AMOUNT (PhP)	DATE DECLARED	
5.1 CASH N/A			
5.2 STOCK			
5.3 PROPERTY			
TOTAL	P		
6. ADDITIONAL SHARES ISSUED DURING THE PERIOD:			
DATE	NO. OF SHARES	AMOUNT	
SECONDARY LICENSE/REGISTRATION WITH SEC AND/OR OTHER GOV'T AGENCY:			
NAME OF AGENCY:	SEC	B S P	I C
TYPE OF LICENSE/REGN.	N/A		
DATE ISSUED:			
DATE STARTED OPERATIONS:			
TOTAL ANNUAL COMPENSATION OF DIRECTORS DURING THE PRECEDING FISCAL YEAR (in PhP)	TOTAL NO. OF OFFICERS	TOTAL NO. OF RANK & FILE EMPLOYEES	TOTAL MANPOWER COMPLEMENT
NOTE: USE ADDITIONAL SHEET IF NECESSARY			

===== PLEASE PRINT LEGIBLY =====						
GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER						
SCHEDULE OF CAPITAL EXPENDITURE						
PARTICULARS	SECTOR	FOREIGN COMPONENT		NO SUPPORT SUBSIDY		Bank loans
		Loan	Grant	Project	Tax	
N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Other Source	Total Local Component	Total Cost	Status		
	N/A	N/A	N/A	N/A		

GOVERNMENT CORPORATION INFORMATION SHEET

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER	
INCOME STATEMENT	
For the year : December 31, 2018	
	Amount
INCOME	
Business and Service Income (Loading Fund from SSS and GSIS)	248,245,136.04
Gains and Premiums	-
Others	6,252,592.00
Total Income	254,497,728.04
Less: Share of National Government	-
Income After Share of National Government	-
EXPENSES	
Business Expenses	
Personal Services	86,590,449.16
Maintenance and Other Operating Expenses	79,794,272.37
Financial Expenses	83,517.53
Others (Non-Cash Expenses)	17,583,526.18
Total Expenses	184,051,765.24
Net Income (Loss) Before Subsidy	70,445,962.80
Subsidy Income	-
Net Income (Loss) Before Tax	70,445,962.80
Income Tax Expense (Tax Exempt pursuant to PD 626, as amended)	-
Net Income (Loss) After Tax	70,445,962.80

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER

CASH FLOW STATEMENT

For the year ended December 31, 2019

CASH FLOW FROM OPERATING ACTIVITIES	Amount
Cash Inflows	222,800,925.70
Cash Outflows	164,245,038.75
Net Cash Provided By (Used in) Operating Activities	58,555,886.95
CASH FLOWS FROM INVESTING ACTIVITIES	
Cash Inflows	1,690,506.95
Cash Outflows	6,896,303.93
Net Cash Provided By (Used In) Investing Activities	(5,205,796.98)
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	53,350,089.97
Effects of Exchange Rate Changes on Cash and Cash Equivalents	-
Cash and Cash Equivalents, Beginning of Period	139,983,112.66

GOVERNMENT CORPORATION INFORMATION SHEET

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER					
As of December 31, 2019					
CASH AND INVESTMENT BALANCE REPORT					
	AMOUNT	TERM (No. of Days)	RATE (Per Annum)	DATE	
I. Cash on Hand	1,063,341.33			Issue	Maturity
II. Cash in Banks					
a. Current Account / Savings Account	13,095,841.90				
b. Time Deposit (Landbank)	179,174,019.40				
III. Net Deposits with BTr					
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					
VII. Others - Investment in Time Deposit	168,516,850.64				

GOVERNMENT CORPORATION INFORMATION SHEET

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER		
BALANCE SHEET (For the year December 31, 2019)		
	ASSETS	Amount
	Current Assets	
Cash & Cash Equivalents		193,333,202.63
Short-Term Investments		168,516,850.64
Receivables (net)		75,001,147.65
Inventories		3,422,963.12
Prepayments and Deferred Charges		140,624.86
Gross International Reserves		-
Others		182,180.00
Total Current Assets		440,596,968.90
	Non-Current Assets	
Long -term Receivables (net)		-
Long-term Investments (net)		-
Property, Plant & Equipment (net)		86,483,022.05
Investment Property		-
Intangible Assets		-
Others		402,478.28
Total Non-Current Assets		86,885,500.33
	TOTAL ASSETS	527,482,469.23
	LIABILITIES AND EQUITY	
LIABILITIES	Current Liabilities	
Trade and Non-Trade Payables		18,801,641.18
Current Portion of Long-term Debt		-
Deposit Liabilities		-
Currency in Circulation		-
Securities sold under agreements to repurchase		-
Current Liabilities of Water Districts		-
Others		-
Total Current Liabilities		18,801,641.18
	Non-Current Liabilities	
Deposit Payables		-
Bills Payable		-
Bonds Payable		-
Notes Payable		-
Mortgage Payable		-
Loans and Advances Payable		-
Accrued Retirement Benefits		27,468,801.73
Deferred Credits		2,103,048.75
Non-Current Liabilities of Water Districts		-
Others		-
Non-Current Liabilities		29,571,850.48
	TOTAL LIABILITIES	48,373,491.66
	EQUITY	
Government Equity		249,042,285.00
Capital Stock		-
Restricted Capital		-
Retained Earnings		230,066,692.57
Others		-
TOTAL EQUITY		479,108,977.57
TOTAL LIABILITIES AND EQUITY		527,482,469.23

GOVERNMENT CORPORATION INFORMATION SHEET

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER	
NET OPERATING INCOME	Amount
Schedule 1A	
Accounts receivable - national government	
Clients deposit	
Collection from advances on insured receivables	
Collection of loans receivables	
Collection of pari-passu payables	
Collection of receivables -- loading fund	195,395,325.00
Collection of receivables -- employees/others	3,854,895.76
Collection of receivables -- clients, employees, others	
Collection of Sales Contract Receivable (Income)	20,544,829.89
Dividend Income	
Foreign Exchange gains	
Gain on sale of Investment	
Interest and penalties	
interest on investments and deposits	2,613,438.17
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)	2,082,943.83
Total:	224,491,432.65
TOTAL:	224,491,432.65
*data based on cash flow statement 2019	

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GOVERNMENT CORPORATION NAME: OCCUPATIONAL SAFETY AND HEALTH CENTER

CHART OF ACCOUNTS

For the year : 2019

Net Operating Income	
Sale of Acquired Assets	
Collection of Advances on Guaranteed Loans	
Advances on Guaranteed Loans	
Capital Expenditures	
Dividend Payments	
CASH SURPLUS/DEFICIT	
<i>Operating Receipts</i>	
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)	
TOTAL:	
Current Subsidies:	
Other receipts: (Schedule 1A)	224,491,432.65
Total Receipts:	224,491,432.65
Less:	
Interest and Financial Charges	-
Final Withholding Tax	-
Prior period expenses	-
Other current expenditures (PS AND MOOE) actual	166,468,239.06
(CAPITAL OUTLAY)	6,896,303.93
Total:	51,126,889.66

I, DIANNE LILIBETH S. BAUTISTA,
(NAME)

Corporate Secretary OF THE ABOVE-MENTIONED
(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 3RD DAY OF JUNE, 2020 IN MAKATI CITY.


(SIGNATURE)

JUN 08 2020 SUBSCRIBED AND SWORN TO BEFORE ME IN **MAKATI CITY** CITY/PROVINCE, PHILIPPINES ON
_____, AFFIANT PERSONALLY APPEARED BEFORE ME AND EXHIBITED TO ME HIS/HER COMMUNITY TAX
CERTIFICATE NO. _____ ISSUED AT _____ ON _____, 2020.

DOC. NO: 341
PAGE NO. 70
BOOK NO. 30
SERIES OF 2020

NOTARY PUBLIC FOR _____ CITY/PROVINCE
Notarial Commission No. RUBEN T.M. RAMIREZ
Commission expires on December 31 Notary Public for Makati City
Roll of Attorney Number Until December 31, 2021
PTR No. 2086 E. Pasqua St., Makati City
IBP No. IBP O.R. No. 097071/ December 10, 2019
Office Address: Roll No. 28947/MCLE No. VI-0020246
PTR No. MKT 8117044/1-02-2020
Appointment No. M-158