MEDICAL CERTIFICATE

(For Employment)

	INSTRUCTIONS		
b Attach this certific. The results of the must be attached to the must be attached to the must be attached to the must be attached.	Test	nd reemployment.	
	X-Ray		
F	OR THE PROPOSED API	POINTEE	
NAME (Last Name First Name, Name Extension (if any) and Middle Name) ANDRINO, MARLON TERAYTAY		AGENCY/AD	
Tab-ang, Khim,	Baybay (ity, leyfe	Virca, Bayban	, City, Leyfe
40 sex Mate	CIVIL STATUS.	PROPOSED PO	DSITION
I hereby certify that I have re	I, M.D. Ital 3800	examination results, persona	N ABOUT THE POINTEE
OFFICIAL DESIGNATION	•	Bare Foot Stripped 161 75KG DATE EXAMINED	D'E nol
Cn	il - Maritu		
F	repli (hm	shy) Bully	~ W
			IV,