REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1	1. NAME OF EMPLOYEE MORENO LUZ
(POSITION DESCRIPTION FORM)	(Family Name) Given Name) (Middle Name)
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4. DEPT./BRANCH/DIVISION	5. WORK STATION/PLACE OF WORK
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			Signature of Empl	oyee
	Dec. 6, 1995		Johnson	1000 L NO 8
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Date

SAMUEL S. GO PRESIDENT

Head of Agency