

**REPUBLIC OF THE PHILIPPINES**  
 DEPARTMENT OF TRANSPORTATION  
 LAND TRANSPORTATION OFFICE  
**PROFESSIONAL DRIVER'S LICENSE**


 Last Name, First Name, Middle Name  
**MAGDAYO, RODERICK GALEMBA**

Nationality Sex Date of Birth Weight (kg) Height(m)  
 PHL M 1992/09/26 71 1.73

Address  
**CAMP JMC MANOLO FORTICH BUKIDNON**

Licensee No. Expiration Date Agency Code  
**K02-16-013337 2026/09/26 K17**

Blood Type Eyes Color  
 O+ BLACK

Restrictions Conditions  
 1,2,3 NONE

Signature of Licensee: *larry*  
 Signature of Assistant Secretary: *Edgar C. Galvante*  
**EDGAR C. GALVANTE**  
 Assistant Secretary


**III ORGAN DONATION:**  
 I WILL NOT DONATE ANY ORGAN


**IV. IN CASE OF EMERGENCY NOTIFY:**  
 NAME: ANDRESA G. MAGDAYO  
 ADDRESS: Z-B UPPER PUERTO CDOCC  
 TEL. NO.: 09067249214

**I. RESTRICTIONS:**  
 1. MOTORCYCLES/MOTORIZED TRICYCLES  
 2. VEHICLE UP TO 4500 KGS G V W  
 3. VEHICLE ABOVE 4500 KGS G V W  
 4. AUTOMATIC CLUTCH UP TO 4500 G V W  
 5. AUTOMATIC CLUTCH ABOVE 4500 G V W  
 6. ARTICULATED VEHICLE 1600 KGS G V W AND BELOW  
 7. ARTICULATED VEHICLE 1601 UP TO 4500 G V W  
 8. ARTICULATED VEHICLE 4501 & ABOVE G V W

**II. CONDITIONS:**  
 A. WEAR EYEGASSES  
 B. DRIVE ONLY W/SPECIAL EQPT FOR UPPER LIMBS  
 C. DRIVE ONLY W/SPECIAL EQPT FOR LOWER LIMBS  
 D. DAYLIGHT DRIVING ONLY  
 E. ACCOMPANIED BY A PERSON W/NORMAL HEARING

Serial Number  
**154341150**





**REPUBLIC OF THE PHILIPPINES**  
 Unified Multi-Purpose ID

CRN - 0111-4661075-1


SURNAME **MAGDAYO**  
 GIVEN NAME **RODERICK**  
 MIDDLE NAME **GALEMBA**

SEX **MALE**  
 DATE OF BIRTH **1992/09/26**

ADDRESS  
**169 4TH ST CAMP JMC AGUSAN CANYON  
 PHILLIPS BUKIDNON PHL 8705**




F729.30.60






In case of loss, please return to the nearest SSS Branch

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