



109292014000750



SECURITIES AND EXCHANGE COMMISSION

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Company Information

SEC Registration No. PW0000115A
Company Name ATLAS CONSOLIDATED MINING
Industry Classification
Company Type Stock Corporation

Document Information

Document ID 109292014000750
Document Type Statement of Changes in the Beneficial Ownership
Document Code 23B
Period Covered September 26, 2014
No. of Days Late 0
Department CFD
Remarks

COVER SHEET

P W 0 0 0 0 1 1 5 A

S.E.C. Registration Number

A T L A S C O N S O L I D A T E D M I N I N G A N D

D E V E L O P M E N T C O R P O R A T I O N

(Company's Full Name)

9 T H F L O O R Q U A D A L P H A C E N T R U M

1 2 5 P I O N E E R S T R E E T M A N D A L U Y O N G

(Business Address: No. Street City /Town / Province)

CARMEN ROSE A. BASALLO-
ESTAMPADOR

Contact Person

(632) 584-9788

Company Telephone Number

1 2 3 1

Month Day
Fiscal Year

2 3 - B

FORM TYPE

Last Wednesday of April

Month Day
Annual Meeting

N/A

Secondary LicenseType, If Applicable

Dept. Requiring this Doc.

Amended Articles Number/Section

Total No. of Stockholders

Total Amount of Borrowings

Domestic

Foreign

To be accomplished by SEC Personnel concerned

File Number

LCU

Document I.D.

Cashier

Remarks = pls. use black ink for scanning purposes

FORM 23-B

REVISED

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 23 of the Securities Regulation Code

Check box if no longer subject to filing requirement

1. Class of Equity Security	2. Transaction Date (Month/Day/Year)	4. Securities Acquired (A) or Disposed of (D)		3. Amount of Securities Owned at End of Month %	Number of Shares	4. Ownership Form: Direct (U) or Indirect (I)	5. Nature of Indirect Beneficial Ownership
		Amount	(A) or (D)				
common shares	9/23/2014	4,200	D	15.22	17,080	D	
	9/23/2014	5,000	D	15.30			
	9/25/2014	3,000	D	15.02			
	9/25/2014	2,000	D	15.04			
	9/25/2014	3,000	D	15.12			
TOTAL		17,200					

Table 1 - Equity Securities Beneficially Owned

1. Name and Address of Reporting Person CARMEN-ROSE A. BASALLO-ESTAMPADOR		2. Issuer Name and Trading Symbol Atlas Consolidated Mining and Development Corporation (AT)		7. Relationship of Reporting Person to Issuer (Check all applicable) Director <input type="checkbox"/> Officer <input type="checkbox"/> (give title below) _____ Compliance Officer & Assistant Corporate Secretary <input checked="" type="checkbox"/>	
9th Floor Quad Alpha Centrum,		3. Tax Identification Number 229-062-738		5. Statement for Month/Year Sep-14	
125 Pioneer Street, Mandaluyong City		4. Citizenship Filipino		6. If Amendment, Date of Original (Month/Year) N/A	

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this Report is true, complete and accurate. This report is signed in the City of Mandaluyong on 26 September 2014.

Carmen-Rose A. Basallo-Estampador
CARMEN-ROSE A. BASALLO-ESTAMPADOR

