



Republic of the Philippines
SOCIAL SECURITY SYSTEM

SS NUMBER SLIP

35-1360545-2

BACALLA, ABEGAIL DIAZ

04/18/2001



35-1360545-2 BACALLA, ABEGAIL DIAZ

Gmail

Compose

Inbox

Starred

Snoozed

Sent

Drafts

More

Labels

Date and Time of Appointment
Transaction No. **MO0698**
Purpose of Application

REMEMBERS ON MEMBER

Your membership status is through My SSS account

Activation of SSS loans at SUPPORTING DOCUMENTS

To set an appointment for appointment system after Member SS Number issue. This is a system generated email.

3 attachments • Scanned

Abegail Bacalla
in SSS

I can't open my account in SSS

Reply

Enable desktop notifications for Gmail. No, thanks

MO0698IW202112078123 Date/Time Generated: 07 December 2021 10:33:01 AM

SS NUMBER 35-1360545-2					
NAME					
LAST NAME BACALLA		FIRST NAME ABEGAIL		MIDDLE NAME DIAZ	
FACTS OF BIRTH					
DATE OF BIRTH (MMDDYYYY) 04182001	PLACE OF BIRTH (CITY/MUNICIPALITY) SAN FERNANDO	PROVINCE/STATE CEBU	COUNTRY PHILIPPINES	SEX FEMALE	
FATHER'S NAME LAST NAME: BACALLA MIDDLE NAME: TEODULO SUFFIX: PONGASI					
MOTHER'S MAIDEN NAME LAST NAME: DIAZ MIDDLE NAME: JUDITHA SUFFIX: TAMPUS					
DEMOGRAPHIC DATA					
HOME ADDRESS (RM, FLUR/UNIT NO. & BLDG. NAME or HOUSELOT NO. & BLK NO.) RCNA SAN ISIDRO		CITY/TOWN (SUBDIVISION)			
BARANGAY/DISTRICT/LOCALITY SAN ISIDRO		CITY/MUNICIPALITY SAN FERNANDO	PROVINCE CEBU	POSTAL CODE 6018	COUNTRY CODE 0063
CIVIL STATUS SINGLE	HEIGHT (in centimeters) 167	WEIGHT (in kilograms) 45	DISTINGUISHING FEATURES	NATIONALITY FILIPINO	RELIGION CHRISTIAN
OTHER CARD APPLICANT DATA					
TELEPHONE NUMBER (area code + TEL. NO.)	MOBILE NUMBER (0967) 836-1880	EMAIL ADDRESS bacallaabegail27@gmail.com			
DEPENDENT(S)/BENEFICIARIES					
SPOUSE (LAST NAME)		FIRST NAME		MIDDLE NAME	
CHILDREN (LAST NAME)		FIRST NAME		MIDDLE NAME	
OTHER BENEFICIARIES (if without spouse & child and parents are both deceased)					
LAST NAME		FIRST NAME		MIDDLE NAME	
FOR SELF-EMPLOYED/OVERSEAS FILIPINO WORKER/NON-WORKING SPOUSE					
SELF-EMPLOYED (SE)		OVERSEAS FILIPINO WORKER (OFW)		NON-WORKING SPOUSE (NWS)	
Profession/Business	Foreign Address		SS No./Common Reference No. of Working Spouse		
Year Prof./Business Started					
Monthly Earnings	Monthly Earnings	Are you applying for membership in the Fair Fund Program?		Monthly Income of Working Spouse (P)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
PURPOSE OF APPLICATION					
PURPOSE FOR EMPLOYMENT		PROFESSION/BUSINESS		ESTIMATED MONTHLY SALARY	
UMID CARD APPLICATION WITH ATM OPTION					
<input checked="" type="checkbox"/> UMID CARD AS ATM CARD		BANK NAME UNION BANK OF THE PHILIPPINES		BANK BRANCH UNIONBANK	
CERTIFICATION, DATA PRIVACY CONSENT AND AUTHORIZATION					
<p>1. I certify that the information provided are true and correct.</p> <p>2. I hereby consent to:</p> <ul style="list-style-type: none"> the collection, data capture, storage, biometric matching and the retention of my personal data for the generation/issuance of my CRN, card production and delivery, further processing and payment of my loans and SSS benefits; sharing of these data with SSS service providers to carry out the purposes stated above; and disposal of this application in the manner consistent with the Data Privacy Act. <p>3. I trust that all these data shall be kept confidential by SSS and its service providers and my bank.</p> <p>4. I further give my consent to SSS to share necessary data with my chosen bank for the generation of bank account number, crediting of loan and benefit proceeds to the account number and payment of said loan and benefit proceeds. For this purpose, I consent for the sharing of my bank account number with SSS.</p>					

2020 (1) Privacy alert

10:20 PM
8/26/2024