SS NUMBER: 06-3661750-8

SOCIAL SECURITY SYSTEM

PERSONAL RECORD

(Please Use Black Ink Only)
(Gumamit ng Itim na Tinta Lamang)

E-1 (Rev. 08/94)

SURNAME (APELYIDO): MONTILLA
GIVEN NAME (PANGALAN): [illegible]
MIDDLE NAME (GITNANG PANGALAN): [illegible]

ADDRESS (NO. & STREET, CITY/TOWN & PROVINCE) (TIRAHAN: BILANG AT KALYE, LUNGSOD/BAYAN AT LALAWIGAN): Basak Lapu-Lapu City
POSTAL CODE: 6 0 1 1

SEX (KASARIAN): ☐ MALE (LALAKI) ☐ FEMALE (BABAE)
DATE OF BIRTH (KAPANGANAKAN): m m d d y y
CIVIL STATUS (KATAYUANG SIBIL): ☐ SINGLE (WALANG ASAWA) ☐ MARRIED (MAY ASAWA) ☐ WIDOWED (BALO)

BENEFICIARIES (MAKIKINABANG)

SPOUSE (ASAWA):

FATHER (AMA): JOVITO F. MONTILLA

MOTHER (INA): MARIA VICTORIA I. MONTILLA

CHILDREN (MGA ANAK) — DATE OF BIRTH (KAPANGANAKAN) m m d d y y

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2
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4
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SSS Lapu-Lapu Branch
Member Services Section
☑ Received ☐ Refused
☐ Original / Certified True Copy
☐ Compared with the Original / Certified True Copy
JOHANNA T. CHUA
Date and Time: APR 07 2015

OTHER BENEFICIARIES (IF WITHOUT SPOUSE, CHILD OR PARENT)
(IBANG MAKIKINABANG: KUNG WALANG ASAWA, ANAK O MAGULANG)

	NAME (PANGALAN)	RELATIONSHIP (RELASYON)
1	JOE VICXEL MONTILLA	SISTER
2	JAVVE-AN MONTILLA	BROTHER
3		

THUMBMARK
LEFT (KALIWA) | RIGHT (KANAN)

I hereby certify that the above information are true and correct.
(Ako ay nagpapatunay na ang aking mga isinaad ay totoo at tama.)

Signature (Lagda)

PLEASE READ REMINDERS AT THE BACK (BASAHIN ANG PAALALA SA LIKOD)

CONSOLIDATED PAPER PRODUCTS, INC. TEL. # 893-86-20 TO 32 FAX # 893-86-28