



# MEMBER'S DATA FORM (MDF)

SSS-FDF-039  
(07/10/2017)

FOR REGISTERED MEMBERS ONLY
PREGNANT MD NUMBER 164000332428
REGISTRATION TRACKING NUMBER 911187034838

OCCUPATIONAL STATUS		EMPLOYED	
MEMBERSHIP CATEGORY		EMPLOYED - PRIVATE	
	LAST NAME	FIRST NAME	MIDDLE NAME
MEMBER	KIM	FLAIR	BAJAMUNDE
FATHER	KIM	ALFREDO	TRIELLER
MOTHER ( Maiden Name)	BAJAMUNDE	NIEVES	PADAO
SPOUSE ( Maiden)	CALUNEGAS	GINA	ADRIAS
MEMBER'S NAME AS APPEARING IN THE BIRTH CERTIFICATE	KIM	FLAIR	BAJAMUNDE
DATE OF BIRTH	MARITAL STATUS		TAXPAYER IDENTIFICATION NUMBER (TIN)
10/26/1996	MARRIED		305924105
PLACE OF BIRTH	CITIZENSHIP		SSS NUMBER
DAPITAN CITY, ZAMBOANGA DEL NORTE, PHILIPPINES	FILIPINO		607405007
SEX	HEIGHT (cm.)	WEIGHT (kg.)	PROMINENT DISTINGUISHING FACIAL FEATURES
MALE	0.00	0.00	
COMMON REFERENCE NUMBER (CRN)	FREQUENCY OF MEMBERSHIP SAVINGS (MS) PAYMENT		EMPLOYEE NUMBER
			1470
			For AFP/PNP Employee, Serial/Badge No. For Deo Ed Employee, Division Code-Station Code

ADDRESS AND CONTACT DETAILS					
PERMANENT HOME ADDRESS					COUNTRY + AREA CODE + TELEPHONE NUMBER
Unit/Floor No., Floor		Building Name		HOME	
Lot No.	Block No.	Phase No.	House No.	Street Name	CELLPHONE
			2429	OBEDIENCE ST	+63 (0395) 1513676
Subdivision		Barangay		BUSINESS (DIRECT LINE)	
VILLALON		CAPITOL SITE			
Municipality/City		Province/State/Country		BUSINESS (TRUNK LINE)	
CEBU CITY		CEBU, PHILIPPINES			
ZIP Code		E-MAIL ADDRESS			
6000		theodoreremirez@gmail.com			
PRESENT HOME ADDRESS					
Unit/Floor No., Floor		Building Name		Phase No.	
House No.	Street Name		Subdivision		Barangay
2429	OBEDIENCE ST		VILLALON		CAPITOL SITE
Municipality/City		Province/State/Country		Zip Code	
CEBU CITY		CEBU, PHILIPPINES		6000	
PREFERRED MAILING ADDRESS			EMPLOYER/BUSINESS ADDRESS		

THIS FORM MAY BE REPRODUCED, NOT FOR SALE.