

COV-01214 (09-2015)

Republic of the Philippines SOCIAL SECURITY SYSTEM PERSONAL RECORD

FOR ISSUANCE OF SS NUMBER

SS NUMBER

06-3813361-1

THIS FORM MAY BE REPRODUCED AND IS NOT FOR SALE. THIS CAN ALSO BE DOWNLOADED THRU THE SSS WEBSITE AT www.sss.gov.ph.

EASE READ THE INSTRUCT	TIONS AND REMINDERS AT TH	E BACK BÉFORE FILLING OUT THIS FORM	PRINT ALL INFORMATION IN CAPITAL LETTERS AND
despitato, norto contrato esta esta esta esta esta esta esta esta	так том-былосин-комоник с приножно объек режу поставления объек том инсти- РАКТ I — сопствення съект почен отнечность почения	TO BE FILLED OUT BY THE REGISTR. A. PERSONAL DATA	ANT
ME (LAST NAME)	(FIRST NAM		(SUFFIX) DATE OF BIRTH (MMDDVVVV)
PANTITAL	A		(SUFFIX) DATE OF BIRTH (MMDDYYYY)
x PANTUTAN Icivii	L STATUS	MARIE RABADON	TAX IDENTIFICATION NUMBER (IF ANY)
☐ Male ☐ Female ☐	Single Married Wid		TAX IDENTIFICATION NOWBER (IF ANY)
TIONALITY RELI	IGION Warried Wig	owed Legally Separated Others	DVINCE) (CITY, COUNTRY, if born outside the Philippines)
FILLDINO IN	RUMAN (ATHOLIS LIFER JUNIT NO. & BLDG. NAME)	(HOUSE/LOT & BLK, NO.)	(STREET NAME) (FRI)
			(GORDIVISION)
(BARANGAY/DISTRICT/LOCAL	ITY) (CITY/MUNICI	PALITY) (PROVINCE)	(COUNTRY) ZIP CODE
TACL LADAN DBILE/CELLPHONE NUMBER	TALISA JÉ-MAIL ADDR	CEBU (FBU	PHILIPPINES GOUT
			TELEPHONE NUMBER (COUNTRY CODE+ AREA CODE+ TEL. NO.)
<u>09239096553</u> THER 1	(LAST NAME)	a. pantian a yahan can	(MIDDLE NAME) (SUFFIX)
	MICIAN		
OTHER'S MAIDEN NAME	(LAST NAME)	BABY (FIRST NAME)	RABAGU (SUFFIX)
R	ABADON	CHARLIAN	GILLIAN
CONTROL NO.	В.	DEPENDENT(S)/BENEFICIARY/IES	Check this box if using additional sheet
POUSE	(LAST NAME)	(FIRST NAME) (MIDDLE NAME)	(SUFFIX) DATE OF BIRTH (MMDDYYYY)
W. D. ID. D. L.			
HILD/REN	(LAST NAME)	(FIRST NAME) (MIDDLE NAME)	(SUFFIX) DATE OF BIRTH (MMDDYYYY)
7			
3,			
4.			
1. / · · · · · · · · · · · · · · · · · ·	*		
THE STATE OF THE S	C. FOR SELF-EMPLO	YED/OVERSEAS FILIPINO WORKER/NON-I	WORKING SPOUSE
ELF-EMPLOYED (SE)	OVERSEAS FILIPINO		NON-WORKING SPOUSE (NWS)
- Profession/Business	Foreign Address		SS No./Common Reference No. of Working Spouse
Year Prof./Business_Star	ted	,	Monthly Income of Working Spouse (P)
·		Are you applying for membership	l agree with my spouse's membership with SSS.
Monthly Earnings	Monthly Earning	s in the Flexi-Fund Program?	
Ь .	P	YES NO	SIGNATURE OVER PRINTED NAME OF WORKING SPOUSE
BOOD HET IT THE SEE AS A SEE SEEN OF A SEE AND SEE AS A SEED OF THE PROPERTY OF THE SEED AND A SEED AND A SEED AND A SEED AS A	Tel Market and American Control of Control o	D. CERTIFICATION	Philips for the distribution of the form of the second state of th
I certify that t	he information provided in th	is form are true and correct.	Registrant is required to affix fingerprints.
	nnot sign, affix fingerprints in the		
•			
MINISTA ALLE	THE THE THEFT	A 1 31 3 11	RIGHT THUMB RIGHT INDEX
PRINTED N	MB, YANITAN S	GNATURE TO DATE. JOH	RIGHT THUMB RIGHT INDEX
	IWODKING CDOLLOS! MOC	PART II - TO BE FILLED OUT BY SSS	anne un monte que a se monte monte manera professor for a consistent for conse manera conservamente conservamente conservamente
BUSINESS CODE (FOR SE)	WORKING SPOUSE'S MSC (FOR	RECEIVED BY (REPRESENTATIVE OFFICE/PARTNER AGENT)	RECEIVED & PROCESSED BY (MSS, BRANCH/SERVICEOFF) CE/FOREIGN OFFICE)
	P		JAKVIB NIKK E JARANILLA
MONTHLY SS CONTRIBUTION			Monthed Service Section 04-21-16 / 04:2
(FOR SE/OFW/NWS)	(FOR SE/OFW/NWS)	SIGNATURE OVER PRINTED NAME DATE &	- China Cile Distriction
P	B	REVIEWED BY	TIME SIGNATURE OVER PRINTED NAME DATE & TIME
START OF PAYMENT	FLEXI-FUND APPLICATION	(MSS. BRANOWSERWICE BELIEF) LSUYO	/ VA21-16
(FOR SE/NWS)	(FOR OFW)	CHO CIO ETETRO	
	Approved Disapprove	d SIGNATURE OVER PRINTED NAME	DATE & TIME