
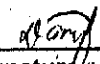


SS NUMBER 06-3089893-8		SOCIAL SECURITY SYSTEM PERSONAL RECORD (Please Use Black Ink Only) (Gumamit ng Itim na Tinta Lamang)		 E-1 (Rev. 08/94)									
SURNAME (APELYIDO) ABAYAN		GIVEN NAME (PANGALAN) DANRYL		MIDDLE NAME (GITNANG PANGALAN) CENIZA									
ADDRESS (NO. & STREET; CITY/TOWN & PROVINCE) (TIRAHAN: BILANG AT KALYE, LUNGSOD/BAYAN AT LALAWIGAN) 22 GARTFIELD ST. CEBU CITY					POSTAL CODE 6000								
SEX (KASARIAN) <input checked="" type="checkbox"/> MALE (LALAKI) <input type="checkbox"/> FEMALE (BABAE)		DATE OF BIRTH (KAPANGANAKAN) m m d d y y 0 9 2 4 8 6		CIVIL STATUS (KATAYUANG SIBIL) <input checked="" type="checkbox"/> SINGLE (WALANG ASAWA) <input type="checkbox"/> MARRIED (MAYASAWA) <input type="checkbox"/> WIDOWED (BALO)									
BENEFICIARIES (MAKIKINABANG)													
SPOUSE (ASAWA)			FATHER (AMA) DANNY. R. ABAYAN (DECEASED)										
CHILDREN (MGA ANAK)		DATE OF BIRTH (KAPANGANAKAN) m m d d y y		MOTHER (INA) DELIA. C. ABAYAN									
1				OTHER BENEFICIARIES (IF WITHOUT SPOUSE, CHILD OR PARENT) (IBANG MAKIKINABANG: KUNG WALANG ASAWA, ANAK O MAGULANG) <table border="1"> <thead> <tr> <th>NAME (PANGALAN)</th> <th>RELATIONSHIP (RELASYON)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td></td> </tr> <tr> <td>2</td> <td></td> </tr> <tr> <td>3</td> <td></td> </tr> </tbody> </table>		NAME (PANGALAN)	RELATIONSHIP (RELASYON)	1		2		3	
NAME (PANGALAN)	RELATIONSHIP (RELASYON)												
1													
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THUMBMARK			I hereby certify that the above (Ako ay nagpapatunay na ang aking mga isinaad ay totoo at tama.)  Signature (Lagda)										
LEFT (KALIWA)		RIGHT (KANAN)											

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