CUSTOMER	INFORMATION SHEET			Date	Accomplished	
	Please fill out all information and	d indicate N/A on the items th	nat are not appl	icable		
Name: (Last Name, First Name Middle Name) Age:						
Date of Birth	Place of Birth	of Birth Nationality Mobile Number				
O's Presented ID No.		No.	ID Expiry (mm-dd-yy)			
1.	_					
2.						
Present Address:						
(No./Unit/Floor/Bldg), (Street/Village/Subd)		Brgy.	Munic	Municipality/Town		
Permanent Address:						
(No./Unit/Floor/Bldg), (Street/Village/Subd)		Brgy.	Munic	Municipality/Town		
Source of Funds		Monthly Income	0	Name of Business/Employer		
☐ Employed Government☐ Employed Private		☐ Less than ₱5,000 ☐ ₱5,000 to less th		Date of Registration (mm-dd-yy)		
☐ Overseas Filipino Worker☐ Business Owner		·	₱15,000 to less than ₱25,000₱25,000 to less than ₱35,000			
☐ Pensioner		☐ ₱35,000 to less t	☐ ₱35,000 to less than ₱50,000 Inclusive Dates of Employment (n		ployment (mm-dd-yy)	
☐ Investor☐ Others: (please specify:)		☐ ₱50,000 or more	F 50,000 of more			
Address of Business/En	ployer					
(No./Unit/Floor/Bldg), (Street/Village/Subd)		Brgy.	Municipality/Town		Zip Code	
 The information provided have provided. I authorized GPRS – Unit required information and positive with GPRS – Unified Prod Prevention (AML-TFP) law third parties in connection I am agreeing to the GPR 	ersonal Information Consent I in this form is true, complete and a fied Products and Services Inc. to p eayment of its corresponding/applica fiects and Services Inc.'s are subject fiects. I authorized GPRS – Unified Pr fiects with the transaction or any investigat fiects and Services fields and Services f	process the transaction indicated by the second sec	ted upon submi at financial trans nd Terrorist Fina disclose informa	ission of sactions ancing ations to		
Custome	er's Signature over Printed Name	. <u> </u>		Date		