

CUSTOMER INFORMATION FORM

BRANCH CODE	PH0010413	DATE	09/08/2022		
ID TYPE:	ID9	CIF NO.	OOL112296		
PERSONAL ACCOUNT					
CLIENT NAME (LAST NAME, GIVENNAME, MIDDLE NAME)					
MR ONE FIRST ONE MIDDLE ONE LAST					
PRESENT ADDRESS (NO./STREET/BARANGAY/DISTRICT/MUNICIPALITY/CITY/TOWN/PROVINCE)					ZIPCODE
ADDRESS LINE BAYUGAN 2 SAN FRANCISCO, AGUSAN DEL SUR PHILIPPINES 1945					1945
PERMANENT ADDRESS (NO./STREET/BARANGAY/DISTRICT/MUNICIPALITY/CITY/TOWN/PROVINCE)					ZIPCODE
ADDRESS LINE BAYUGAN 2 SAN FRANCISCO, AGUSAN DEL SUR PHILIPPINES 1945					1945
DATE OF BIRTH (MM/DD/YYYY)	PLACE OF BIRTH	NATIONALITY	SEX(M/F)	ID TYPE(CODE & NO.)	
1996-11-22	ANGONO	FILIPINO	MALE	ID9	
SSS/GSIS NO.	TIN	SOURCE OF FUNDS		EMAIL ADDRESS	
1231231231	123123123	N / A		sample@gmail.com	
EMPLOYER NAME (IF EMPLOYED)/BUSINESS NAME(IF SELF-EMPLOYED)		NATURE OF WORK/BUSINESS		POSITION/OCCUPATION	
PHILIPPINE REALTY AND HOLDINGS CORPORATION		ACCOMODATION AND FOOD SERVICE ACTIVITIES		ACCOUNTANT - ACCOUNTANTS AND AUDITORS	
EMPLOYER/BUSINESS ADDRESS					EMPLOYER/BUSINESS CONTACT NO.
ADDRESS LINE SAN VICENTE (IGANG) IVANA, BATANES PHILIPPINES 1945					026513547

OWNERSHIP	PRIVATE SCHOOLS, UNIVERSITIES AND COLLEGES	HOME PHONE NO.	026532154
CIVIL STATUS	SINGLE	MOBILE NO.	639651231231
SPOUSE NAME (IF MARRIED)			DATE OF BIRTH
N / A			N / A
MOBILE NUMBER		EMPLOYER / BUSINESS CONTACT NO.	MOTHER'S MAIDEN NAME
N / A		N / A	N / A
EMPLOYER BUSINESS/ADDRESS			
N / A			
NATURE OF WORK / BUSINESS			
N / A			
OTP			
(Electronically Signed via OTP) OTP: 62JO1ZJW OTP EMAIL : sample@gmail.com OTP VERIFIED ON: September 8, 2022 1:47 PM			