CUSTOMER INFORMATION FORM				
BRANCH CODE		DATE	10/08/2021	
ID TYPE:		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 1 DITALE DIPACULAO, AURORA PHILIPPINES 1950				1950
PERMANENT ADDRESS (NO./STREET/BARANGAY/DISTRICT/MUNICIPALITY/CITY/TOWN/PROVINCE)				ZIPCODE
ADDRESS LINE 1 DITALE DIPACULAO, AURORA PHILIPPINES 1950				1950
DATE OF BIRTH (MM/DD/YYYY)	PLACE OF BIRTH	NATIONALITY	SEX(M/F)	ID TYPE(CODE & NO.)
1996-11-22	ANGONO	FILIPINO	MALE	
SSS/GSIS NO.	TIN	SOURCE OF FUNDS		EMAIL ADDRESS
1231231231	123123123			sample@gmail.com
EMPLOYER NAME (IF EMPLOYED)	NATURE OF WORK/BUSINESS		POSITION/OCCUPATION	
PHILIPPINE REALTY AND HOLDING	ACCOMODATION AND FOOD SERVICE ACTIVITIES		ACCOUNTANT - ACCOUNTANTS AND AUDITORS	
EMPLOYER/BUSINESS ADDRESS				EMPLOYER/BUSINESS CONTACT NO.
ADDRESS LINE SAN VICENTE (IGA			026513547	
Page 1 of 2				

OWNERSHIP PRIVATE SCHOOLS, UNIVERSITIES AND **HOME PHONE NO.** 0265125478 COLLEGES **CIVIL STATUS** SINGLE MOBILE NO. 639651231231 **SPOUSE NAME (IF MARRIED) DATE OF BIRTH MOBILE NUMBER EMPLOYER / BUSINESS MOTHER'S MAIDEN NAME** CONTACT NO. **EMPLOYER BUSINESS/ADDRESS**

NATURE OF WORK / BUSINESS

OTP

(Electronically Signed via OTP) OTP: V770NCTX OTP EMAIL: sample@gmail.com OTP VERIFIED ON: October 8, 2021 3:20 PM