

CUSTOMER INFORMATION FORM

BRANCH CODE	PH0010207	DATE	12/01/2022	
ID TYPE:	ID21	CIF NO.	MSM081198	
PERSONAL ACCOUNT				
CLIENT NAME				
MR MARK WELL SAMBRANO MAPANAO				
MOTHER'S MAIDEN NAME				
ALICE MAPANAO				
PRESENT ADDRESS (NO./STREET/BARANGAY/DISTRICT/MUNICIPALITY/CITY/TOWN/PROVINCE)				ZIPCODE
16-E LANZONES ST. BALANGKAS CITY OF VALENZUELA, METRO MANILA PHILIPPINES 1475				1475
PERMANENT ADDRESS (NO./STREET/BARANGAY/DISTRICT/MUNICIPALITY/CITY/TOWN/PROVINCE)				ZIPCODE
16-E LANZONES ST. BALANGKAS CITY OF VALENZUELA, METRO MANILA PHILIPPINES 1475				1475
DATE OF BIRTH (MM/DD/YYYY)	PLACE OF BIRTH	NATIONALITY	SEX(M/F)	ID TYPE(CODE & NO.)
1998-08-11	MANILA	FILIPINO	MALE	ID21
SSS/GSIS NO.	TIN	SOURCE OF FUNDS		EMAIL ADDRESS
74894565415	785412566	N / A		mark.mapanao@citysavings.com.ph
EMPLOYER NAME (IF EMPLOYED)/BUSINESS NAME(IF SELF-EMPLOYED)		NATURE OF WORK/BUSINESS		POSITION/OCCUPATION
CTI GROUP PHILS., INC.		OTHER SERVICE ACTIVITIES		AGENT - OTHER GOVERNMENT ASSOCIATE PROFESSIONALS

EMPLOYER/BUSINESS ADDRESS			EMPLOYER/BUSINESS CONTACT NO.
24 MANDARAGAT ST MADALIPAY BUCAY, ABRA PHILIPPINES 752			1234
OWNERSHIP	PRIVATE COMPANIES	HOME PHONE NO.	456232155855
CIVIL STATUS	SINGLE	MOBILE NO.	639754039658
SPOUSE NAME (IF MARRIED)			DATE OF BIRTH
N / A			N / A
MOBILE NUMBER		EMPLOYER / BUSINESS CONTACT NO.	
N / A			
EMPLOYER BUSINESS/ADDRESS			
N / A			
NATURE OF WORK / BUSINESS			
N / A			
OTP			
(Electronically Signed via OTP) OTP: ORCXB2YB OTP EMAIL : mark.mapanao@citysavings.com.ph OTP VERIFIED ON: December 1, 2022 12:19 PM			