

<b>SS NUMBER</b> <div style="font-size: 1.5em; font-family: cursive;">34-1371516-7</div>		<b>SOCIAL SECURITY SYSTEM</b> <b>PERSONAL RECORD</b> <small>(Please Use Black Ink Only)</small> <small>(Gumamit ng Itim na Tinta Lamang)</small>		 <div style="font-size: 2em; font-weight: bold;">E-1</div> <small>(Rev. 08/94)</small>									
<b>SURNAME</b> <small>(APELYIDO)</small> <div style="font-size: 1.2em; font-family: cursive;">Borlongan</div>		<b>GIVEN NAME</b> <small>(PANGALAN)</small> <div style="font-size: 1.2em; font-family: cursive;">Jonathan</div>		<b>MIDDLE NAME</b> <small>(GITNANG PANGALAN)</small> <div style="font-size: 1.2em; font-family: cursive;">Heling</div>									
<b>ADDRESS (NO. &amp; STREET; CITY/TOWN &amp; PROVINCE)</b> <small>(TIRAHAN: BILANG AT KALYE, LUNGSOD/BAYAN AT LALAWIGAN)</small>					<b>POSTAL CODE</b> <div style="font-size: 1.2em; font-family: cursive;">114120</div>								
<b>SEX</b> <small>(KASARIAN)</small> <input type="checkbox"/> <b>MALE</b> <small>(LALAKI)</small> <input type="checkbox"/> <b>FEMALE</b> <small>(BABAE)</small>		<b>DATE OF BIRTH</b> <small>(KAPANGANAKAN)</small> <div style="font-size: 1.2em; font-family: cursive;">11/10/49</div>		<b>CIVIL STATUS</b> <small>(KATAYUANG SIBIL)</small> <input type="checkbox"/> <b>SINGLE</b> <small>(WALANG ASAWA)</small> <input type="checkbox"/> <b>MARRIED</b> <small>(MAY ASAWA)</small> <input type="checkbox"/> <b>WIDOWED</b> <small>(BALO)</small>									
BENEFICIARIES (MAKIKINABANG)													
<b>SPOUSE (ASAWA)</b>			<b>FATHER (AMA)</b>										
<b>CHILDREN (MGA ANAK)</b>		<b>DATE OF BIRTH (KAPANGANAKAN)</b> <div style="font-size: 0.8em;">m m d d y y</div>		<b>MOTHER (INA)</b>									
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div style="font-size: 0.8em;">1</div> <div style="font-size: 0.8em;">2</div> <div style="font-size: 0.8em;">3</div> <div style="font-size: 0.8em;">4</div> <div style="font-size: 0.8em;">5</div> </div>		<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div style="font-size: 0.8em;">1</div> <div style="font-size: 0.8em;">2</div> <div style="font-size: 0.8em;">3</div> </div>		<b>OTHER BENEFICIARIES (IF WITHOUT SPOUSE, CHILD OR PARENT)</b> <small>(IBANG MAKIKINABANG: KUNG WALANG ASAWA, ANAK O MAGULANG)</small> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%; text-align: center;">NAME <small>(PANGALAN)</small></th> <th style="width: 40%; text-align: center;">RELATIONSHIP <small>(RELASYON)</small></th> </tr> </thead> <tbody> <tr><td style="border-bottom: 1px solid black;"> </td><td style="border-bottom: 1px solid black;"> </td></tr> <tr><td style="border-bottom: 1px solid black;"> </td><td style="border-bottom: 1px solid black;"> </td></tr> <tr><td style="border-bottom: 1px solid black;"> </td><td style="border-bottom: 1px solid black;"> </td></tr> </tbody> </table>		NAME <small>(PANGALAN)</small>	RELATIONSHIP <small>(RELASYON)</small>						
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<div style="text-align: center;">   <b>LEFT (KALIWA)</b> </div>		<div style="text-align: center;">   <b>RIGHT (KANAN)</b> </div>		<p>I hereby certify that the above  (Ako ay nagpapatunay na ang aking mga isinaad  information are true and correct.  ay totoo at tama.)</p> <div style="border-top: 1px solid black; margin-top: 20px; text-align: center;"> <b>Signature</b> <small>(Lagda)</small> </div>									

PLEASE READ REMINDERS AT THE BACK (BASAHIIN ANG PAALALA SA LIKOD)