

**R-5**

REV. 02-98

Republic of the Philippines
SOCIAL SECURITY SYSTEM
**CONTRIBUTIONS
PAYMENT RETURN**
(TO BE SUBMITTED IN QUADRUPLICATE)

SBR NO. POST MARK/SBR DATE TELLER'S INITIAL

AMOUNT

DATE

(THIS IS YOUR OFFICIAL RECEIPT WHEN VALIDATED)

EMPLOYER'S ID NUMBER

03-8756623-8

EMPLOYER'S REGISTERED NAME

Titanium Corporation

ADDRESS

(NO. & STREET)

(BARANGAY)

733 Wood St., Malibay, Pasay City

POSTAL CODE

1300

(TOWN/DISTRICT)

(CITY/PROVINCE)

TEL. NO.

INSTRUCTIONS	APPLICABLE PERIOD		SOCIAL SECURITY CONTRIBUTION	EMPLOYEE COMPENSATION CONTRIBUTION	TOTAL
	MONTH	YEAR			
1. CHECK THE BOX TO INDICATE THE TYPE OF PAYOR <input checked="" type="checkbox"/> REGULAR EMPLOYER <input type="checkbox"/> HOUSEHOLD EMPLOYER 2. INDICATE THE YEAR FOR WHICH PAYMENT IS APPLICABLE. 3. REMIT YOUR EMPLOYEE'S/HOUSEHOLD HELPER'S MONTHLY CONTRIBUTIONS ON OR BEFORE THE 5TH DAY OF THE FOLLOWING MONTH TO AVOID THE 3% PENALTY PER MONTH FOR LATE PAYMENT. 4. REMIT YOUR PAYMENT EITHER: a) THROUGH SSS ACCREDITED BANK; OR b) BY REGISTERED MAIL 5. MAKE ALL CHECKS AND POSTAL MONEY ORDERS PAYABLE TO SSS	JANUARY				
	FEBRUARY				
	MARCH				
	APRIL				
	MAY	2017	19,855.00	300.00	20,155.00
	JUNE				
	JULY				
	AUGUST				
	SEPTEMBER				
	OCTOBER				
	NOVEMBER				
	DECEMBER				
6. ATTACH YOUR EXTRA COPY OF THIS FORM AND SPECIAL BANK RECEIPT WHEN SUBMITTING THE CORRESPONDING CONTRIBUTION FORM R-3 (CONTRIBUTION COLLECTION LIST) OR R-3 TAPE/ DISKETTE.	ADD UNDER PAYMENT				
	LESS OVER PAYMENT				
TOTAL REMITTANCE		₱ 19,855.00	₱ 300.00	₱ 20,155.00	
7. SUBMIT YOUR FORM R-3 WITHIN FIVE (5) DAYS AFTER THE APPLICABLE QUARTER OR YOUR R-3 TAPE/DISKETTE ON OR BEFORE THE 10TH DAY OF THE MONTH FOLLOWING THE APPLICABLE MONTH TO THE NEAREST SSS OFFICE OR THROUGH POSTAL SERVICES OFFICE. 8. INDICATE YOUR PENALTY REFERENCE NUMBER, IF ANY, FOR PAYMENT OF PENALTIES.	FORM OF PAYMENT		AMOUNT		
	<input type="checkbox"/> CASH P _____				
	<input type="checkbox"/> CHECK P _____				
	BANK NAME : _____				
CHECK NO. : _____					
DATE : _____					
TOTAL P _____					
TOTAL AMOUNT IN WORDS:					
CERTIFIED CORRECT:					
SIGNATURE OVER PRINTED NAME					