



SS NUMBER 		SOCIAL SECURITY SYSTEM MEMBER'S DATA AMENDMENT FORM (PORMA PARA SA PAGBABAGO NG IMPORMASYONG UKOL SA MIYEMBRO) Please Print All Information & Use Black Ink Only (Pakisulat nang Malinaw ang Lahat ng Impormasyon at Gumamit Lamang ng Itim na Tinta)		 E-4 (DEC. 96)																									
SURNAME <small>(APELYIDO)</small>		GIVEN NAME <small>(PANGALAN)</small>	MIDDLE NAME <small>(GITNANG PANGALAN)</small>	DATE OF BIRTH <small>(ARAW NG KAPANGANAKAN)</small> M M D D Y Y																									
ADDRESS (NO. & STREET, CITY/TOWN & PROVINCE) <small>(TIRAHAN, BILANG AT KALYE, LUNGSOD/BAYAN AT LALAWIGAN)</small>				POSTAL CODE																									
<p>1. CORRECTION OF NAME: <small>(PAGWAWASTO NG PANGALAN)</small></p> <p>FROM _____ TO _____</p> <p>2. CORRECTION OF DATE OF BIRTH: <small>(PAGWAWASTO NG KAPANGANAKAN)</small></p> <p>FROM _____ TO _____</p> <p>3. CHANGE OF CIVIL STATUS <small>(PAGBABAGO NG KATAYUANG SIBIL)</small></p> <p><input type="checkbox"/> MARRIED <small>(MAY ASAWA)</small> <input type="checkbox"/> WIDOWED <small>(BALO)</small></p> <p>TO BE FILLED UP BY WOMEN ONLY: <small>(PARA SA MGA BABAE LAMANG)</small></p> <p>MAIDEN NAME: _____</p> <p>MARRIED NAME: _____</p> <p>4. NEW/ADDITIONAL DEPENDENT(S)/BENEFICIARY(IES): <small>(BAGO/KARAGDAGANG TANGKILIK/MAKIKINABANG)</small></p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">NAME <small>(PANGALAN)</small></th> <th style="text-align: center;">RELATIONSHIP <small>(RELASYON)</small></th> <th style="text-align: center;">DATE OF BIRTH <small>(KAPANGANAKAN)</small> mm dd yyyy</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <p>5. CHANGE OF DEPENDENT(S)/BENEFICIARY(IES): <small>(PAGBABAGO NG TANGKILIK/MAKIKINABANG)</small></p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">FROM</th> <th style="text-align: center;">TO</th> <th style="text-align: center;">RELATIONSHIP <small>(RELASYON)</small></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>						NAME <small>(PANGALAN)</small>	RELATIONSHIP <small>(RELASYON)</small>	DATE OF BIRTH <small>(KAPANGANAKAN)</small> mm dd yyyy	_____	_____	_____	_____	_____	_____	_____	_____	_____	FROM	TO	RELATIONSHIP <small>(RELASYON)</small>	_____	_____	_____	_____	_____	_____	_____	_____	_____
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FOR SSS USE			I certify that the above information are true. (Ako ay nagpapatunay na ang aking mga isinaad ay totoo)																										
PROCESSED BY:			_____ SIGNATURE (LAGDA)																										
REVIEWED BY:			DATE RECEIVED																										
APPROVED BY:																													

Internet Edition (7/2000)

Cut along the dotted line.

Please read instructions on page 2 of this form.

REMINDERS

Any request for data amendment by the member must be supported by the following documents:

DATA CHANGES

1. Correction of Name

PRIMARY DOCUMENTS REQUIRED

Birth, or in its absence, Baptismal Certificate or in the absence of both, any two (2) of the secondary documents enumerated below; and Affidavit of two (2) persons who have personal knowledge of the fact that the name appearing in the primary or secondary documents belongs to the same person.

2. Correction of Date of Birth

Birth, or in its absence, Baptismal Certificate (or in the absence of both), any two (2) of the secondary documents enumerated below.

3. Change of Civil Status

Marriage Contract of member

4. New/Additional/Change of
Dependent(s)/Beneficiary(ies)

Birth or Baptismal Certificate of children to be reported.

Documents that may be submitted in the absence of the primary documents:

- (1) Certificate of loss/non-availability thereof from the Local Civil Registrar of the place where you were born and the Parish Priest of the locality where you were baptized;
and
- (2) Any two (2) of the following secondary documents that show your correct name and date of birth or age:
 - a) Record of Employment (accomplished upon employment)
 - b) GSIS Member's Record (if member is also a government employee)
 - c) Certification from the National Archives
 - d) Alien Certificate of Registration (ACR)
 - e) Marriage Contract of Member
 - f) Birth Certificates of children
 - g) School Records
 - h) Passport
 - i) Joint Affidavit of two (2) disinterested persons attesting to the fact of your birth.