

SS NUMBER 		SOCIAL SECURITY SYSTEM SELF-EMPLOYED DATA RECORD FORM BRG-103		RS-1 REV. 7/91																	
SURNAME		GIVEN NAME		MIDDLE NAME		DATE OF BIRTH		PLACE OF BIRTH													
ADDRESS																					
SEX			CIVIL STATUS				TEL NO.														
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOW/ER				RESIDENCE: _____ OFFICE: _____														
POSTAL CODE (SSS USE ONLY)		PROFESSIONAL/BUSINESS CODE		YEAR PROFESSION/BUSINESS STARTED		DATE OF COVERAGE		SS NUMBER PREVIOUSLY ASSIGNED IF ANY													
TAX ACCOUNT NUMBER				YEARLY NET EARNINGS			MONTHLY NET EARNINGS														
				P _____			P _____														
BENEFICIARY/IES																					
SPOUSE				AGE		FATHER				AGE											
CHILDREN				AGE		MOTHER				AGE											
1 _____				_____		OTHER BENEFICIARIES (If you do not have spouse, children and parents) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">NAME</th> <th style="width: 50%;">RELATIONSHIP</th> </tr> </thead> <tbody> <tr> <td>1 _____</td> <td>_____</td> </tr> <tr> <td>2 _____</td> <td>_____</td> </tr> <tr> <td>3 _____</td> <td>_____</td> </tr> </tbody> </table>				NAME	RELATIONSHIP	1 _____	_____	2 _____	_____	3 _____	_____				
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DATE RECEIVED					I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. _____ SIGNATURE																
					THUMB PRINTS																
					LEFT		RIGHT														

Internet Edition (7/2000)

Cut along the dotted line.

Please read instructions on page 2 of this form.

INSTRUCTIONS

1. Submit this form in two copies together with the original/certified true copy and photocopy of the following supporting documents:

PRIMARY DOCUMENTS

- Birth Certificate; or
- Baptismal Certificate; or
- Passport

OTHER REQUIRED DOCUMENTS

For reporting spouse - Marriage Contract

For reporting child -

If legitimate:

Birth or Baptismal Certificate

If illegitimate:

Birth or Baptismal Certificate or in its absence,
Proof of Parentage or Relationship

If legally adopted:

Decree of Adoption

In the absence of any of the primary documents, submit any two of the following where the name and date of birth of the registrant appear:

SECONDARY DOCUMENTS

- Record of Employment/Employer ID
- GSIS Member's Record
- Certification from National Archives
- Alien Certificate of Registration
- School/Voter's Identification Card
- Driver's License
- Marriage Contract
- Birth Certificate of children
- Joint Affidavit of two disinterested persons attesting to the correct name & date of birth of the applicant

2. If the above-stated documents are not available at the time of registration, comply immediately by submitting to the nearest SSS office to facilitate availment of benefits and privileges.

REMINDERS

1. An SS number is a lifetime number. No one should have more than one SS number.
2. Notify us in writing in case you would like to change your monthly contribution.
3. A change in monthly contribution may be requested any time but only once in a year.

If the requested change is one step higher or lower from your current monthly salary credit (MSC), no supporting document is required.

If the requested change is more than the next higher or lower step from your current MSC, submit a copy of your Income Tax Return (ITR) for the prior year duly received by the Bureau of Internal Revenue.