SIC - 01247 (12-2015)

Republic of the Philippines )

City/Municipality of \_\_\_\_\_\_\_\_\_) S.S.

Province of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**AFFIDAVIT OF UNDERTAKING**

**(Sickness/Maternity Benefit Claim)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of legal age, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ citizen, signgle/married, with addres at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

after having been sworn in accordance with law, hereby depose and state, that:

1. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a member of the Social (SSS) with SS Number/Common Reference Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_;
2. I was an employee of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, with business address at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and was separated on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

 (MM/DD/YYYY) (MM/DD/YYYY)

1. That I cannot secure a certificate of separation and non-advance sickness/maternity benefit due to the reason/s stated below:

[ ] The company is on strike.

[ ] I have a pending labor case with the company.

[ ] Company has ceased operation.

[ ] I was separated from the company due to Absence Without Official Leave (AWOL).

[ ] With strained relations with my employen

[ ] Others (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In case it is proven that I have given false information, I undertake to return or to be deducted from future benefits due me in full the amount I have received from the SSS;
2. I am aware that I may be criminally liable for any false statement or representation made

in this document or for any other documents submitted in connection with my claim; and

1. I am executing this affidavit to attest to the truthfulness, veracity and due execution of the

foregoing statements and this document.

Affiant further sayeth naught.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Date) (Place)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AFFIANT

(Signature over Printed name)

SUBSCRIBED AND SWORN to me this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_ 20 \_\_\_\_\_\_\_\_, affiant exhibiting to me his/her Community Tax No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ issued on \_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and Identification Card with No. \_\_\_\_\_\_\_\_\_\_ issued by \_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_/ valid until \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 Notary Public

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