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AGREEMENT ON SOCIAL SECURITY BETWEEN THE REPUBLIC OF THE PHILIPPINES AND THE PORTUGUESE REPUBLIC

CERTIFICATE ON INSURANCE RECORD OF THE PHILIPPINES

Article 8 of the Administrative Arrangement

1. Competent Portuguese Institution		
Name:		
Address:		
-		

2.	Insured person/Member			
	Name (Surname, Given Name Middle Name)	Date of birth (MM/DD/YY)		
_	Philippine Social Insurance Number	Portuguese Insurance Number		
	SS No.			
	GSIS No.			

3. Insurance	. Insurance periods			
from	to	Number of insurance months	Type of insurance(1)	Remarks

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from	to	Number of insurance months	Type of insurance(1)	Remarks
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4. Li	4. Liaison Agency of the Philippines				
International Operations Group Social Security System East Avenue, Diliman Quezon City, PHILIPPINES 1100					
Date		Signature	Official seal/stamp		
		Explanatory Note	s		
(1)	Please specify insurance periods as follows:				
	-Compulsory insurance				
	-Voluntary insurance -Equivalent periods				