

REPUBLIC OF THE PHILIPPINES)
City/Municipality of _____) S.S.
Province of _____)

AFFIDAVIT OF FUNERAL EXPENSES WITH UNDERTAKING Funeral Benefit Program

I, _____, of legal age, and a resident of _____, after having
(NAME OF SURVIVING LEGAL SPOUSE)
(HOME ADDRESS OF SURVIVING LEGAL SPOUSE)
been sworn in accordance with law hereby deposes and states that:

1. I am the surviving legal spouse of the deceased, _____;
(NAME OF DECEASED MEMBER/PENSIONER)
2. The deceased was a member of the Social Security System (SSS) with SS Number or Common Reference Number (CRN) _____;
(SS NUMBER OR CRN OF DECEASED MEMBER/PENSIONER)
3. I personally know that the deceased member died on _____
(DATE OF DEATH OF DECEASED MEMBER/PENSIONER)
at _____;
(ADDRESS OF PLACE OF DEATH OF DECEASED MEMBER/PENSIONER)
4. As the surviving legal spouse, I actually paid for his/her funeral expenses in the amount of _____
(TOTAL AMOUNT OF FUNERAL EXPENSES IN WORDS)
(Php _____), limited to the following:
(TOTAL AMOUNT OF FUNERAL EXPENSES IN FIGURES)
 - a. Embalming services
 - b. Burial transfer services and permits
 - c. Funeral services for the dead including church service fee or its equivalent if from other religions
 - d. Cremation or interment services
 - e. Purchase or rent of coffin
 - f. Purchase or rent of niche/cemetery/memorial lot/columbarium
 - g. Payment for memorial/funeral insurance plan
5. The Official Receipts for the payments I made for the above funeral expenses were lost or are currently unavailable;
6. I am aware of the liabilities connected with the filing of this claim (criminal/civil/administrative) should there be any falsification, deceit, fraud, misrepresentation, or non-disclosure pursuant to Republic Act No. 11199 or the Social Security Act of 2018 and other applicable laws, rules, and regulations;
7. If I am not entitled to the funeral benefit as determined by the SSS, I undertake to return the full amount of the settled funeral benefit through direct payment to the SSS or by authorizing the SSS to deduct the said benefit from my future benefit/s, as applicable, without prejudice to other remedies that SSS may take based on applicable rules;
8. I am executing this affidavit to attest to the truth of the above-mentioned statements and to support my claim for the SSS funeral benefit of my deceased spouse.

AFFIANT FURTHER SAYETH NAUGHT.

Signature over Printed Name of Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____, at _____, Philippines, affiant having exhibited to me his/her valid government issued identification card _____ with no. _____ bearing his/her picture and signature as competent evidence of his/her identity known to me and to me known to be the same person who executed the foregoing instrument and he/she acknowledged to me that the same is his/her free and voluntary act and deed.

WITNESS MY HAND AND SEAL, on the date/place first above-written.

Notary Public

Doc. No. : _____
Page No. : _____
Book No. : _____
Series of : _____