

REPUBLIC OF THE PHILIPPINES KAGAWARAN NG PANANALAPI KAWANIHAN NG INGATANG-YAMAN (BUREAU OF THE TREASURY)

Attachment 1 Fidelity Bond Application Form (Revision No. 02 Date: May 30,2022)

RISK NUMBER
(to be accomplished by BTr Officer)

REQUEST FOR APPLICATION FOR BONDING AND/OR CANCELLATION OF FIDELITY BOND OF ACCOUNTABLE PUBLIC OFFICER

INSTRUCTIONS:	1. ACCOMPLISH TH 2. PRINT ENTRIES			APPROPRIATE BO	XES WITH CHECK	"\"	
YPE OF PPLICATION:	X NEW	RENEWAL	CANCELLATION,	please proceed item Nos. 24-32	OLD RISK NUMBER: For Renewal		
				CENTINO Ext. (e.g., Jr.) Middle Name			
ADDRESS VSU	, PANGASUGAN, CITY	OF BAYBAY LEYTE	LEYTE				
DATE OF BIRTH (mm/dd/yyyy)	4. PLACE OF B			AT MENS THE ST	PASSPORT SIZE ID PHOTO	
SEX X MALE				8. CONTAC 53565060	OT NUMBER		
911092228 X		X MARRIE	MARRIED SEPARATED		DDRESS emandez@vsu.edu.ph		
 MONTHLY INCOME (Salaries, allowances, business income and the 45,706.00 				11. ESTIMATED MONTHLY EXPENSES 30,000.00			
If yes, give details: 3. a. Have you ever been charged of any administrative and/or crimin offense? YES X NO If yes, give details: Case No/s.			e and/or criminal	b. Have you ever been found guilty of any administrative and/or criminal case before any administrative body, tribunal or court? YES X NO If yes, give details: Case No/s.			
Date Filed:				Date Filed:			
Stat	tus of Case/s:			Status o	f Case/s:		
CHARACTER RE	FERENCE (Individu	ual must not be re	lated up to the fourth o	legree by consange	uinity or affinity to applica		
NAME			ADDRESS			CONTACT NUMBER	
DR, BREATRIZ BELONIAS DR, EDGARDO E, TULIN			BRGY,PANGASUGAN,BAYBAY CITY		535650600		
DR, DILBERTO FERRAREN			BRGY,PANGASUGAN,BAYBAY CITY BRGY,PANGASUGAN,BAYBAY CITY		535650600 535650600		
						ally understand that any	
misrepresental against me.	tion made in this	application and	d supporting docum	nents shall caus	e the filing of adminis	strative/criminal case(s)	
Government Is ID/License/Par Date/Place of	ssport Number	: GSIS ID : 006-0086-5 : TACLOBAN			CENTINO FERNANDE nature over Printed Name /D		
16. SUBSCRIBED AND SWORN to before me this ID as indicated above.				, affiant exhibiting his/her validly issued Government			
Doc. No. Page No. Book No. Series of	See Chare or se				Signature of Office	cer/Person Administering Oath	