

REPUBLIC OF THE PHILIPPINES KAGAWARAN NG PANANALAPI KAWANIHAN NG INGATANG-YAMAN (BUREAU OF THE TREASURY) Attachment 3: Annex D Fidelity Bond Application Form (Revision No. XXX Date XXXXX)

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 B	OXES WITH CHECK	" ~ "	
TYPE OF APPLICATION:	X NEW	RENEWAL	. CA	NCELLATION, p	lease proceed em Nos. 24-32	OLD RISK NUMBE For Renewal		
1. NAME ABELA	J	ULIUS				VILLAR		
			en Name			Middle Name	-	7
2. ADDRESS VSU, F	PANGASUGAN, CITY C	F BAYBAY I	EYTE, LEYTE					h .
			OF BIRTH DAPA, SUI	RIGAO DEL N	NORTE		(-	
5. SEX	FEMALE	7.CIVIL S	TATUS	WIDOWED	8. CONTA 53565	OCT NUMBER		
6. TIN	Institution of the International	1 0		WIDOWED		ADDRESS		
183883538		X M	ARRIED	SEPARATE		ibela@vsu edu ph		
10. MONTHLY INCO	OME (Salaries, allow	ances, bus	iness incom	e and the like		NATED MONTHLY EXP	ENSIES	
76,907.00					30,000.00			
12. Have you ever to termination, end of YES							ed from the rolls, dismissa	l,
If yes, give	details:	***************************************						
13. a. Have you ever been found guilty of any administrative offense?					b. Have you ever been found guilty of criminal case before any court?			
YES X NO					YES X NO			
If yes, give details:					If yes, give details:			
					Case No/s.			
				Date Filed:				
			-		Status	of Case/s:		
14. CHARACTER R	EFERENCE (Individ	lual must n	ot be related i	up to the fourth	degree by cons	anguinity or affinity to ap	oplicant)	_
NAME				ADDRE	SS	CONTACT NUMBER		
DR. EDGARDO E. TULIN			BRGY. PA	NGASUGAN,	BAYBAY CIT			
DR. BEATRIZ S. BELONIAS			BRGY. PA	NGASUGAN,	BAYBAY CIT			4
DR. DANIEL LESLIE S. TAN			BRGY. PA	NGASUGAN,	BAYBAY CIT	Y. 535650600		_
misrepresenta against me.	ition made in this	applicatio	questions and supp	orting docum-	best of my kn ents shall cau	owledge and belief. I se the filing of admin	fully understand that any pistrative criminal case(s)	
Government Is ID/License/Pa Date/Place of	ssport Number	G09-9	5-004402 2018 ORM			THIS VILLAR ABELA gnature over Printed Name		_
16. SUBSC ID as indicate		N to before	me this		affi	ant exhibiting his/her valid	dly issued Government	
Doc. No. Page No. Book No. Series of						Signature of Off	ficer/Person Administering Oath	le'

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