

WAIVER
(SS Funeral Benefit)

To whom it may concern:

I, _____, of legal age, Filipino, single/married, resident of _____, and is the named payee in the herein receipt for expenses that was incurred in the burial/cremation of the deceased SSS member namely _____ with SS No. _____:

Expense/s	Issuing Company/Amount in the Receipt

hereby waive, renounce, and relinquish in favor of _____, known to me to be the _____ (relation to the deceased member), the full and total amount of the above-mentioned expenses in connection with the FUNERAL BENEFITS claim that he/she filed with the SSS.

Signature Over Printed Name

Signature over printed name of Witness

Signature over printed name of Witness

ACKNOWLEDGEMENT

BEFORE ME, a Notary Public for and in _____, this ___ day of _____, 20___, personally appeared _____, with his ID No. _____, as competent evidence of his 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 _____.