

REPUBLIC OF THE PHILIPPINES)
PASAY CITY)S.S.

**AFFIDAVIT OF LEGAL/CERTIFIED GUARDIAN
OF INCAPACITATED DEPENDENT CHILD**

I, _____, of legal age, Filipino, with address at _____ and the following contact number _____, after having sworn in accordance with law, hereby depose and state:

I am the _____ (state relationship with the child, i.e. father/mother, etc.) and legal guardian of _____ (name of child), a child of the late _____, who was a GSIS member / retiree, who died on _____ at _____;

I hereby declare that the above-named child is the youngest (or, second youngest/third youngest, etc.) of the deceased; that since _____ (approximate age when the child became incapacitated, which should be below 18 years) he/she is suffering from _____ (name of illness or disorder), a physical defect /mental disorder which renders him/her incapable of self-support;

I hereby unconditionally make myself personally and solidarily liable with the child for whatever survivorship benefit the GSIS shall invalidly and erroneously grant the latter due to any inaccurate, incomplete or untruthful statement I have made herein or any inaccurate, incomplete or untruthful information I have otherwise provided to the GSIS;

I am executing this affidavit to attest to the truth of the foregoing statements in support of the application for survivorship benefit of _____ (name of child) under Republic Act No. 8291 and for what other legal purposes it may serve. I fully understand that any inaccurate and untruthful statement in this affidavit shall render me criminally and civilly liable.

Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____ 20____, in the City of Pasay, Philippines, affiant exhibiting to me his/her _____ as Competent Evidence of Identity (CEI):

NOTARY PUBLIC

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Until Dec. 31, 20____
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