



**BOHOL DIOCESAN MULTI-PURPOSE COOPERATIVE**  
CPG East Avenue, Tagbilaran City

## MEMBER'S CHANGE OF INFORMATION FORM

**THE FOLLOWING ARE THE INFORMATION THAT MAY BE CHANGED/ UPDATED:**

Check the appropriate box only.

- Correction of Name                       Change of Marital Status                       Change of Contact Number/ Email  
 Correction of Date of Birth                       Change of Address                       Updating of Beneficiaries

LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME

<b>CORRECTION OF NAME</b> ( <i>Last Name , First Name, Name Extension , Middle Name</i> )						
FROM	TO					
<b>CORRECTION OF DATE OF BIRTH</b>						
FROM ( <i>mm/dd/yyyy</i> )	TO ( <i>mm/dd/yyyy</i> )					
<b>CHANGE OF MARITAL STATUS</b>						
FROM	TO					
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Annulled <input type="checkbox"/> Widow/er <input type="checkbox"/> Legally Separated	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Annulled <input type="checkbox"/> Widow/er <input type="checkbox"/> Legally Separated					
<b>CHANGE OF ADDRESS</b>						
FROM	TO					
<b>CHANGE OF CONTACT NUMBER / EMAIL</b>						
FROM	TO					
<b>UPDATING OF BENEFICIARIES</b>						
LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	RELATIONSHIP	DATE OF BIRTH	PLACE OF BIRTH

### CERTIFICATION

I hereby certify that the information given, and all statements made herein are true and correct. Likewise, I hereby authorize BDMPC to collect record, organize, update/ modify, consult, use, consolidate, block, erase or destruct my personal part of my information. I hereby affirm my right to: (a) be informed; (b) object to processing; (c) access; (d) rectify, suspend or withdraw my personal data; (e) damages; and (f) data portability pursuant to the provision of R.A No. 10173 ( Data Privacy Act of 2012).

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Signature over Printed Name of Member

<b>FOR BDMPC USE ONLY</b>	
Received by:	Checked by:
Approved by:	Date: