

聲明書  
Declaration

本人 \_\_\_\_\_, 持身份證明文件編號 \_\_\_\_\_,  
I, \_\_\_\_\_, holder of identification document no. \_\_\_\_\_

聯絡電話 \_\_\_\_\_, 申請受益人 \_\_\_\_\_ 之  
contact no. \_\_\_\_\_ apply for the funeral allowance of beneficiary \_\_\_\_\_

喪葬津貼，聲明上述受益人之喪葬費用全數由本人支付。本人現聲明未能遞交相  
I declare that all the funeral expenses of the said beneficiary are met by me. I hereby declare that

關之喪葬費收據正本，原因為 \_\_\_\_\_。  
I am unable to submit the original receipt for the funeral expenses because of the following reason: \_\_\_\_\_

本人清楚明白如作虛假聲明須負上法律責任。

**I clearly understand that if I make a false statement, I shall be held legally responsible for the act that I committed.**

此致

澳門特別行政區政府

社會保障基金

To:

Government of the Macao SAR

Social Security Fund

聲明人  
Declarant

日期：\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date: \_\_\_\_ day \_\_\_\_ month \_\_\_\_ year

\_\_\_\_\_  
Signature (must be consistent with the signature on the identification document)