Official Translation from Persian Language

Logo

Social Security Organization

Inquiry Barcode Symbol

With reference to request dated applied by **Ms** , hereby the above-mentioned person paid of insurance premium and wages are as follows.
Meanwhile, the finalized and reliable records shall be notified by the branch at the time of establishing the competency for enjoying legal privileges.

Full Name:	
Insurance Number:	Birth Certificate Number:
National ID Number:	Date of Birth:

Row	Year	Type of Record	Branch Code	Workshop Code	Workshop Name	Mar.-Apr.	April-May	May-Jun.	June-Jul.	July-Aug.	Aug.-Sept.	Sept.-Oct.	Oct.-Nov.	Nov.-Dec.	Dec.-Jan.	Jan.-Feb.	Feb.-Mar.

Certified to be a true translation from the original Persian text
Official English Language Translator to the Judiciary