



# Armed Forces and Police Mutual Benefit Association, Inc.

Col Bonny Serrano Road cor. EDSA, Camp Aguinaldo, Quezon City, 1110  
Landline: +632 8822-MBAI (6224) | Email: mail@afpmbai.com.ph  
Web: www.afpmbai.com.ph | Facebook: AFPMBAIOfficial

## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : BALDON WENDY

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

PERIOD OF COVERAGE 02 August 2023 to 01 August 2023  
(Annual)

PREMIUM PAID : P 372.50

This certificate forms part of Group Master Policy Contract No. 2022-07-144 issued to

**GRAND CANYON SECURITY SERVICES INC.**  
*MCV Building, 888 Banawe street, Quezon City,*

The ARMED FORCES AND POLICE MUTUAL BENEFIT ASSOCIATION, INC., during the term of this policy and while it is in force, will pay the beneficiaries of the insured upon receipt of due proof of the insured's death or disability in the amount specified in the Group Master Policy, provided the premium therefore has been paid, and subject to the provision on Termination of Individual Insurance.

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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

LEAH Y. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : BARANDINO FLORADEL

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: CARABEO ROYANARA

AMOUNT OF INSURANCE

- : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit
- 2. Accidental Death Benefit: P 50,000.00 +
- Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : CARAMBA ARNEL

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : GALARPE EDISON

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: GALVEZ JENNILYN

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : GEALONE FLORIZA

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: GEROLA MICHAEL E

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: LORESCA NICA ANGELA

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MANGARIN MARY ROSE

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MASANGKAY DARIUS

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : NARAGA GIL JR

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : ONG ANNALYN F

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: ORAPA JONA

AMOUNT OF INSURANCE

- : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: PARDILLO MICHAEL

AMOUNT OF INSURANCE

- : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: PULALON MARY ANNE

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
LEAH Y. JOYA  
Deputy Head, NCRSSC, ISD



# Armed Forces and Police Mutual Benefit Association, Inc.

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Landline: +632 8822-MBAI (6224) | Email: mail@afpmbai.com.ph  
Web: www.afpmbai.com.ph | Facebook: AFPMBAIOfficial

## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: RAHMAN FATHMA AISHA

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

PERIOD OF COVERAGE

02 August 2023 to 01 August 2023  
(Annual)

PREMIUM PAID

: P 372.50

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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
LEAH YJOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : RUBITE CAROL

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: TARRAYO MARILOU B

AMOUNT OF INSURANCE

- : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

PERIOD OF COVERAGE

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PREMIUM PAID

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : TIBULE MARLON

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

PERIOD OF COVERAGE 02 August 2023 to 01 August 2023  
(Annual)

PREMIUM PAID : P 372.50

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LEAH JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : TINDUGAN MARVIN

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : TUMBUCON ROBERTO M

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : UNDAG BENJIE C

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : VENTURERO RAYMUND S

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: VIERNES JUSTINE ANDRIAN G

AMOUNT OF INSURANCE

: 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

PERIOD OF COVERAGE

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PREMIUM PAID

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : VINARAO NILO T

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : YABES SANNY

AMOUNT OF INSURANCE : 1. Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit  
2. Accidental Death Benefit: P 50,000.00 +  
Death Benefit: P 50,000.00 + 2,000.00 Burial Benefit

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