



# 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 : MIRANDA JANETH

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

**GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,**  
*21A West Riverside St, San Francisco Del Monte, 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.

The insurance of the Individual Security Guard shall automatically terminate at the earliest of the following dates: The date of the expiration of the period for which the last required premium on his insurance is paid; or Upon termination of his appointment as Security Guard from the Insured Security Agency; or The date the Insured Security Guard attains his 60<sup>th</sup> birthday; or Upon payment of the Face Amount or accrued benefits equivalent to the Face Amount given as disability benefit.

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 : MIRANDA RONALDO

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 V JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MOLITO VECENTICO L

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 : MONCADA FLORDELIZA

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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PREMIUM PAID : P 372.50

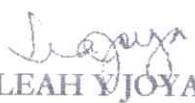
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MONCAYO MOISES P

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

: MONTECILLO JOSEPT

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

: MONTELLANA ALLAN

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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: P 372.50

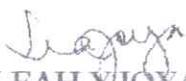
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MONTEMAYOR MELCHOR

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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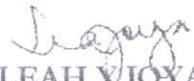
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MONTERO VERNIE

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

: MONTILLANA 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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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MORALES RONEL 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

: MORALES WILLIAM P

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

: MORIAL JULIUS

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 : MOSCARE CRISPIN

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 : MOSCOSO ROBERT

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

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,  
21A West Riverside St., San Francisco Del Monte, 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 V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MOSTOLES ALLAN 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

02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID

: P 372.50

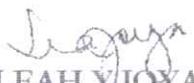
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MUPAK JAYLORD

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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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MUTIA CRISTIAN A

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 : NACARIO RONALD

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 : MALIK IRVIN

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 : MALMIS ALVIN

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 : MALONES ROBERTO

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	: MALUNES RODOLFO 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
PERIOD OF COVERAGE	02 August 2023 to 01 August 2024 (Annual)
PREMIUM PAID	: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MANALILI EMERITO 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

PERIOD OF COVERAGE

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PREMIUM PAID

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MANALO KENETTE 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
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MANAOIS ROGIE

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 2024  
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PREMIUM PAID : P 372.50

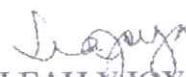
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MANLIMID EDELBERT

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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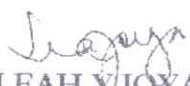
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MANTALABA JOEL

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 : MANUEL PHILIP

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 : MAPAIT JUNRY Q

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,  
*21A West Riverside St., San Francisco Del Monte, 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 V JOYA  
Deputy Head, NCRSSC, ISD



# 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 : MACAPIA ROGELIO JR 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

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

LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MACARANAS RODSON

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



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Web: www.afpmbai.com.ph | Facebook: AFPMBAIOfficial

## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MACARANAS RODSON

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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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MAGALLON JOEL

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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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAGALONA RYAN

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAGBAGO NOEL R

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 2024  
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PREMIUM PAID : P 372.50

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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

: MAGBALOT JOSEF STALIN 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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LEAH V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MAGBANUA DEWEY 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

PERIOD OF COVERAGE

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(Annual)

PREMIUM PAID

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LEAH V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MAGNO ROLANDO 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

PERIOD OF COVERAGE

02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID

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

LEAH V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAHILUM JESON

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 V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MAHINAY ANGELITO
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 2024 (Annual)
PREMIUM PAID	: P 372.50

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LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MALABANAN NOLASCO 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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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MALANA MARK ANTHONY

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 V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARAÑO REX

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAHUSAY ANTHONY V

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.

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 : MAJADILLAS NILO 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAKILAN JOHN 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

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MALAYAO CHRISTIAN

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

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LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARASIGAN GILBERT 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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(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARAVILIA JOVEN RICO

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 : MARAYAG JOSE 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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(Annual)

PREMIUM PAID : P 372.50

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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 : MARIANO ROYLAN

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



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARINAS JERRYMAR

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 2024  
(Annual)

PREMIUM PAID : P 372.50

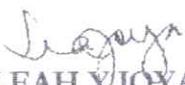
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARON JIMMEL.

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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(Annual)

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Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARTINEZ RIGGIE

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

: MARTORILLAS MARIO

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 : MASANGCAY GERALD 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	: MASIGPIT NELSAN 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
PERIOD OF COVERAGE	02 August 2023 to 01 August 2024 (Annual)
PREMIUM PAID	: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MATA REYNALDO

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 : MATANDAC ELZA

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  
Deputy Head, NCRSSC, ISD



# 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

: MATANGUIHAN BOHN MARK P

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

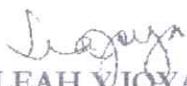
This certificate forms part of Group Master Policy Contract No. 2022-07-144 issued to

**GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,**  
*21A West Riverside St., San Francisco Del Monte, Quezon City,*

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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 : MATANGUIHAN MARION 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MATANGUIHAN ROBERTO P

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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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MATEO REGIE

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

: MAUGALIG EMMANUEL 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

PERIOD OF COVERAGE

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MEDILO JR EMELIO P

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 : MELAD GERBIE

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 : MENDOZA ELVIN

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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(Annual)

PREMIUM PAID : P 372.50

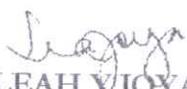
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MENDOZA JASON

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 : MENDOZA JHONNY 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

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MENDOZA RALPH

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 : MENO QUAQUIN

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 : MERCADO ROMEO

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

: MERENCILLO JACKSON

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 : MESA IMELDA CARMELA

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 : MICOSA OLIVER 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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

**GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,**  
*21A West Riverside St., San Francisco Del Monte, Quezon City,*

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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.

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 : MILAN RICARDO

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



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MILLER BYRON

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



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRABALLES JEROME 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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(Annual)

PREMIUM PAID : P 372.50

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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRAFIOR LOUIS

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MIRAM ROMMEL

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRANDA EMMALYN A

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



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MABIGAT DENWIEFRANK

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 V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRANDA JANETH

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRANDA RONALDO

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 V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MOLITO VECENTICO L

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MONCADA FLORDELIZA

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 2024  
(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 : MONCAYO MOISES P

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MONTECILLO JOSEPT

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MONTELLANA ALLAN

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 2024  
(Annual)

PREMIUM PAID : P 372.50

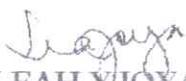
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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MONTEMAYOR MELCHOR

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 2024  
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PREMIUM PAID : P 372.50

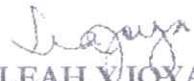
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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



# Armed Forces and Police Mutual Benefit Association, Inc.

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

: MONTERO VERNIE

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

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

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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

: MONTILLANA 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

PERIOD OF COVERAGE

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PREMIUM PAID

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

LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MORALES RONEL 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

PERIOD OF COVERAGE

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PREMIUM PAID

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

  
LEAH V JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MORALES WILLIAM P

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 2024  
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PREMIUM PAID

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

LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MORIAL JULIUS

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

  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MOSCARE CRISPIN

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MOSCOSO ROBERT

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 2024  
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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MOSTALES ARIEL

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 2024  
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LEAH V JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

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

LEAH Y. JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MUPAK JAYLORD

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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LEAH JOYA

Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MUTIA CRISTIAN A

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 2024  
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LEAH Y. JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : NACARIO RONALD

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 : MALIK IRVIN

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 : MALMIS ALVIN

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 V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MALONES ROBERTO

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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# 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	: MALUNES RODOLFO 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
PERIOD OF COVERAGE	02 August 2023 to 01 August 2024 (Annual)
PREMIUM PAID	: P 372.50

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

**GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,**  
*214 West Riverside St, San Francisco Del Monte, 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 : MANALILI EMERITO 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MANALO KENETTE 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	02 August 2023 to 01 August 2024 (Annual)
PREMIUM PAID	: P 372.50

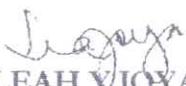
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MANAOIS ROGIE

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

: MANLIMID EDELBERT

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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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MANTALABA JOEL

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 : MANUEL PHILIP

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

: MAPAIT JUNRY Q

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 : MACAPIA ROGELIO JR 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

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MACARANAS RODSON

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

: MACARANAS RODSON

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

: MAGALLON JOEL

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 : MAGALONA RYAN

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 : MAGBAGO NOEL R

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 : MAGBALOT JOSEF STALIN 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

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MAGBANUA DEWEY 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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**GOLDEN GATE SECURITY AND INVESTIGATION SERVICES INC.,**  
*21A West Riverside St, San Francisco Del Monte, Quezon City,*

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

  
LEAH V JOYA  
Deputy Head, NCRSSC, ISD



# 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

: MAGNO ROLANDO 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

PERIOD OF COVERAGE

02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID

: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAHILUM JESON

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MAHINAY ANGELITO
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 2024 (Annual)
PREMIUM PAID	: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MALABANAN NOLASCO 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MALANA MARK ANTHONY

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 : MARAÑO REX

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MAHUSAY ANTHONY V

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 : MAJADILLAS NILO 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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Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MAKILAN JOHN 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	02 August 2023 to 01 August 2024 (Annual)
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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MALAYAO CHRISTIAN

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

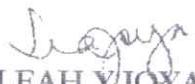
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARASIGAN GILBERT 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 : MARAVILIA JOVEN RICO

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 : MARAYAG JOSE 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 : MARIANO ROYLAN

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 : MARINAS JERRYMAR

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 2024  
(Annual)

PREMIUM PAID : P 372.50

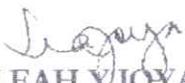
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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



# Armed Forces and Police Mutual Benefit Association, Inc.

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 : MARON JIMMEL.

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

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

  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MARTINEZ RIGGIE

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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(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MARTORILLAS MARIO

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MASANGCAY GERALD 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED	: MASIGPIT NELSAN 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
PERIOD OF COVERAGE	02 August 2023 to 01 August 2024 (Annual)
PREMIUM PAID	: P 372.50

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MATA REYNALDO

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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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 : MATANDAC ELZA

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 2024  
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PREMIUM PAID : P 372.50

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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

: MATANGUIHAN BOHN MARK P

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

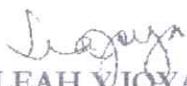
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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MATANGUIHAN MARION 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

: MATANGUIHAN ROBERTO P

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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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MATEO REGIE

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MAUGALIG EMMANUEL 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

PERIOD OF COVERAGE

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LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MEDILO JR EMELIO P

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 : MELAD GERBIE

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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PREMIUM PAID : P 372.50

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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MENDOZA ELVIN

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 2024  
(Annual)

PREMIUM PAID : P 372.50

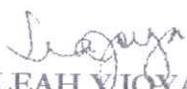
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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
LEAH V. JOYA  
Deputy Head, NCRSSC, ISD



# 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 : MENDOZA JASON

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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

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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 : MENDOZA JHONNY 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

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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MENDOZA RALPH

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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(Annual)

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MENO QUAQUIN

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MERCADO ROMEO

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 2024  
(Annual)

PREMIUM PAID : P 372.50

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LEAH Y JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MERENCILLO JACKSON

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 2024  
(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 : MESA IMELDA CARMELA

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 2024  
(Annual)

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MICOSA OLIVER 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 : MILAN RICARDO

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  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MILLER BYRON

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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(Annual)

PREMIUM PAID : P 372.50

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LEAH Y. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRABALLES JEROME 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

PERIOD OF COVERAGE 02 August 2023 to 01 August 2024  
(Annual)

PREMIUM PAID : P 372.50

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LEAH Y JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRAFIOR LOUIS

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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(Annual)

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LEAH Y. JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: MIRAM ROMMEL

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 2024  
(Annual)

PREMIUM PAID

: P 372.50

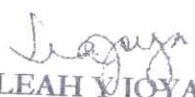
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Given at Quezon City this 22<sup>nd</sup> day of August 2023.

  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : MIRANDA EMMALYN A

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 : MABIGAT DENWIEFRANK

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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Deputy Head, NCRSSC, ISD