



# 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

: ECLARINAL ZALDY 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  
(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.

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 YJOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : EDUNGAN JOENEL 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

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

NAME OF INSURED

: ELARDE JAY CHRIS 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 : ELAURZA MARK ANTHONY 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 : ELCA GRETHEL 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 : ELLE JUMARIEL

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 : ELLE REY

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

: ELUTIN ANDRES

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

: EMBORNAL 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 : EMPLEO EDISON 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 : ENCISO JOHN 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

: ENISIMO PACIFICO JR 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 : ENRIQUEZ FERDINAND

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 : ENTERO RICO H

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 : ENTIA MARCELO 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 : EREJER SHERWIN

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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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



# 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 : ERMINO CARLITO

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 JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : ERPE ROWELL 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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LEAH JOYA  
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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : ESCANDOR ROMEL

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 : ESCANO EMILRIC

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.

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Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: ESCULTOR BENJIE 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

PERIOD OF COVERAGE

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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 : ESGANA JOLAN 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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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

: ESPIRITU MAEJIE ANN

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 JOYA  
Deputy Head, NCRSSC, ISD



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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED : ESPIRITU RICHIE

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 : ESTABILLO 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

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## CERTIFICATE OF INSURANCE COVERAGE

NAME OF INSURED

: ESTEMBER JAMES PATRICK NIAL

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	: ESTEVES 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 : ESTIOCO LOUIE JIM

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