

RELEASE AND DISCHARGE

I understand that the information obtained because of this authorization and consent will be held in the strictest of confidentiality by CIBI and/or the Company and will be maintained in accordance with their respective Privacy Policies. The information obtained will only be used in accordance with and to satisfy the scope for which this authorization/consent has been signed. I release, waive and forever discharge anyone who provides information in relation to this release, from any and all liability for the disclosure of information to CIBI or the Company. I certify that the information set out by me in this authorization/consent is correct.

You may reach out to the DPO at dpo@cibi.com.ph for any privacy concerns

☒ I accept the Terms and Conditions.

Signature *



Name of the Applicant *

John Carlos E. Alfonso

Complete Name (Printed Name)

Date *

02/10/2023

MM/dd/yyyy