

*\*for MAS, MRBS and NMRBS (Combined Claim)*

**RELEASE, WAIVER AND QUITCLAIM**

**KNOW ALL MEN BY THESE PRESENTS:**

I, \_\_\_\_\_, of legal age, Filipino, married/single and presently residing at \_\_\_\_\_, for and in consideration of the sum of Pesos: \_\_\_\_\_ (P \_\_\_\_\_), receipt whereof in full is hereby acknowledged from Philippine Public School Teachers Association (the "Association") with principal place of business at 245 Banawe Street, Quezon City representing full payment of the Mutual Aid System (MAS), Mutual Retirement Benefits (MRBS) and New Mutual Retirement Benefit System (NMRBS) of \_\_\_\_\_ under Policy Nos. \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_ respectively, hereby declare and accept that I have no more right or interest of any kind whatsoever from the Association arising from the said policies and I further state that:

1. I release, remiss and forever discharge the Association, its successors-in-interest, from any action, sum of money, damages, claims and demands whatsoever, which in law or equity I ever had, now have, or which I, my successors and assigns hereafter may have by reason of any matter, cause or thing whatsoever, up to the time of these presents, the intention hereof being to completely and absolutely release the Association, its successors-in-interest, from any and all liabilities arising wholly, partially or directly from my said transaction with the Association;
2. I finally declare that I have read and understood this document of Release Waiver and Quitclaim which is hereby given and made willingly and voluntarily and with full knowledge of my rights under the law.

IN WITNESS WHEREOF, I have hereunto affixed my signature on this \_\_\_\_\_<sup>th</sup> day of \_\_\_\_\_, at \_\_\_\_\_.

\_\_\_\_\_  
Affiant

Signed in the presence of:

\_\_\_\_\_o0o\_\_\_\_\_

**ACKNOWLEDGMENT**

REPUBLIC OF THE PHILIPPINES)  
QUEZON CITY.....) S.S.

BEFORE ME, a Notary Public, on this \_\_\_\_\_<sup>th</sup> day of \_\_\_\_\_, at \_\_\_\_\_, \_\_\_\_\_, personally came and appeared \_\_\_\_\_, with Community Tax Certificate Number \_\_\_\_\_, issued at \_\_\_\_\_, on \_\_\_\_\_, known to me to be the same person who executed the foregoing Release Waiver and Quitclaim and acknowledged to me that the same is his/her voluntary act and deed.

WITNESS MY HAND SEAL, on the date and at the place above written.

Doc. No. \_\_\_\_;  
Page No. \_\_\_\_;  
Book No. \_\_\_\_;  
Series of \_\_\_\_.