**PHILIPPINE PUBLIC SCHOOL TEACHERS ASSOCIATION, INC.**
"Bayani ka, gurong Pilipino. Ang PPSTA, Kumakalinga sa iyo!"
PPSTA Bldg No.2, 245 Banawe Street, Quezon City
**Claims Department**
**Website: www.ppsta.net Email Addresses: ppstaclaims@yahoo.com and support@ppsta.net**
Tel. No. (02) 8988-1415 loc. 119,121,137 -138 & 142-143

# APPLICATION FORM
## MUTUAL RETIREMENT BENEFIT SYSTEM – EARLY REDEMPTION PROGRAM (MRBS-ERP)

**DATE:** _____

Dear Sir/Madam,

**YES** I want to avail of the **Mutual Retirement Benefit System (MRBS) Early Redemption Program.**

Attached are photocopies of my two valid ID's, Original MRBS Certificate/Affidavit of Loss, Latest Pay slip.

Name: _____ Age: _____ Female/Male: _____

Present Address: _____ Contact No: _____

Upon receipt of the proceeds of the said benefit, I shall release and forever discharge the Association, its assigns and successors-in-interest from any similar claims whatsoever arising from my membership with the Association.

_____
**Signature over printed name of member**

***Reminder:***
* This application must be originally signed by the applicant.
* The signature in this application must be similar with the applicant's signature in the valid IDs that he/she will submit.
* Strictly No Erasure and Tampering.

**Please send my PPSTA MRBS-ERP proceeds thru:**

☐ **BDO Bank Remittance** ***(Note: Reference Number will be sent at stated Mobile No.)*** ☐☐☐☐--☐☐☐☐--☐☐☐☐

☐ **Direct Deposit to Personal Account** ***(Note: Commercial Banks Only)***

To ensure that we are crediting the correct bank account, kindly provide the accurate bank account and personal details listed below for us to deposit your check.

1. **Account Name**: _____
2. **Name of Bank**:_____
3. **Bank Account Number**: _____ **Account Type**: ☐ **Current** ☐**Savings** ☐**Others**
4. **Bank Address/Branch**:_____
5. Any of the following scanned or photographed copy of your record or evidence of bank account **CLEARLY** showing both **ACCOUNT NAME** and **ACCOUNT NUMBER**

   *5a*. Bank account Passbook
   *5b*. Validated deposit slip
   *5c*. Bank Statement of Account
   *5d*. Screenshot of online banking account details

***In the event of the approval of my application for MRBS-ERP, I hereby authorize PPSTA to credit the proceeds of the said benefit to my personal account I have indicated.***

☐**Regional Office** _____

☐ **Mailing Address** _____

_____
**Signature over printed name of member**