



ARMED FORCES AND POLICE MUTUAL BENEFIT ASSOCIATION, INC.  
Col Bonny Serrano Road cor. EDSA, Camp Aguinaldo, Quezon City  
Contact no. 8822-MBAI (6224) Web: www.afpmbai.com.ph  
MANDATORY 0.5% MBAI PROTEK MEMBERSHIP INSURANCE  
(FOR NON-UPGRADED AFP MEMBERS)



AUTHORIZATION TO DEDUCT

DATE:✓\_\_\_\_\_

TO : FINANCE/DISBURSING OFFICER

I hereby authorize the Finance/Disbursing Officer to deduct from my salary the amount equivalent to **0.5%** of my basic salary representing my monthly contribution for the MBAI PROTEK coverage and remit the same to the ARMED FORCES AND POLICE MUTUAL BENEFIT ASSOCIATION, INC. (AFPMBAI) effective immediately. In the event that my present Net Take Home Pay (NTHP) is insufficient to cover the monthly contribution, I also authorize my Finance/Disbursing Officer to effect the said deduction immediately as soon as my NTHP is sufficient enough to accommodate it. I further authorize AFPMBAI to access my personal information under my Unit/Office electronic payroll system.

This Authorization shall not relieve me from the responsibility of ensuring that the required deductions are made from my salary and promptly remitted to AFPMBAI when and as they become due. This authority shall terminate only upon my separation from the active service.

PRIVACY NOTICE AS PER REPUBLIC ACT NO. 10173

AFPMBAI upholds an individual’s data privacy rights and observes that all personal information, sensitive personal information and privileged information collected and to be collected are processed or recorded, managed, organized, stored, updated, retrieved, consolidated, used, blocked, and erased according to the Data Privacy Act of 2012 (RA 10173), its Implementing Rules and Regulations (IRR), and various Circulars under the principles of transparency, legitimate purpose, and proportionality.

I hereby give my consent to the processing, sharing, and/or transferring of my personal data relating to my account/s, without notice, to AFPMBAI, its service providers and entities or third parties having authority or right to such disclosure of information as in the case of regulatory agencies, governmental or otherwise, which have required such disclosure from AFPMBAI, also to enable AFPMBAI to service my account/s, to provide all existing features and future enhancements thereto, and to avail other AFPMBAI products, services, facilities and channels as the AFPMBAI deems necessary. I agree to hold AFPMBAI, its affiliates, subsidiaries and third party service providers free and harmless from any liability arising from or in connection with the consent herein given.

✓BRANCH OF SERVICE: (Please check)

☐PA ☐PAF ☐PN ☐PN(M) ☐PMA

\_\_\_\_\_  
Signature of the Chief, FSFO      Signature of the Commanding Officer

✓RANK      ✓(FAMILY NAME, FIRST NAME, MIDDLE NAME)      ✓SERIAL NO./CONTROL/ACCT NO.      ✓SIGNATURE      TIN  
\_\_\_\_\_  
✓UNIT ASSIGNMENT      ✓BIRTHDATE (DD/MM/YYYY)      ✓CONTACT NO.      ✓EMAIL ADDRESS

Submitted by: \_\_\_\_\_ Transmittal No.: \_\_\_\_\_  
For MBAI Personnel / Sales Force ✓Signature over Printed Name / SOLCODE / FAMCODE (for SSS use only)



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#### **MANDATORY 0.5% MBAI PROTEK MEMBERSHIP INSURANCE**

This Authority to Deduct (ATD) form is to ensure that AFP members are aware that 0.5% of their base pay is a mandatory deduction for their MBAI Protek basic membership insurance plan.

This is to formally document your authorization for the 0.5% required deduction.

### **Receive your Member's Equity Fund at Age 56**

Half (50%) of your monthly contribution goes to your Member's Equity Fund which you can get upon your retirement or separation from the service. This fund accumulates over time with compounded annual interest. You can use this amount as Equity Loan for financial emergencies.

The other half (50%) of your monthly contribution is used for your insurance coverage inclusive of the following benefits: Natural Death (regardless of cause), Accidental Death (death due to an accident), Killed-In-Action (KIA), Permanent Disability, Dismemberment benefits and FREE Comprehensive Financial Assistance Benefit (CFAB). CFAB is inclusive of additional KIA, Wounded-In-Action (WIA) and Burial Cash Assistance benefits.

Your MBAI Protek deduction is indicated as any of the following in your payslip: MBAI DUES, MBAI PREM, MBAI PREMIUM and AFP MBA P.