



PORT COMMUNITY MUTUAL BENEFIT ASSOCIATION, INC. (PCMBAI)  
c/o PHILIPPINE PORTS AUTHORITY  
PPA Head Office Bldg., Bonifacio Drive  
South Harbor, Port Area, Manila

Control No. \_\_\_\_\_

**GRANT FOR PABAON PROGRAM FORM**

Name of Member: \_\_\_\_\_ Age: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_  
Present Position: \_\_\_\_\_  
H.O. Dept/PMO: \_\_\_\_\_  
Date of Retirement \_\_\_\_\_

\_\_\_\_\_  
(Signature of member)

\_\_\_\_\_  
(Date)

**ATM Bank Name & Account No.**

**Contact Number**

**NOTED BY:**

\_\_\_\_\_  
(RMD/AO/HO-Dept. Manager)

\_\_\_\_\_  
(Date)

**ENDORSED BY:**

\_\_\_\_\_  
(PMO PCMBAI Trustee)

\_\_\_\_\_  
(Date)

***FOR FUND MANAGEMENT COMMITTEE***

Validation of claim:

\_\_\_\_\_  
**JENNIFER L. LOPEZ**  
Administrative Officer

Endorsement as to  
Availability of Funds:

\_\_\_\_\_  
Treasurer

\_\_\_\_\_  
(Date)

Recommending Approval:

\_\_\_\_\_  
Chairperson, Fund Management Committee

\_\_\_\_\_  
(Date)

APPROVED/DISAPPROVED:

\_\_\_\_\_  
**ASUNCION B. FLORES**  
President, Board of Trustees

\_\_\_\_\_  
(Date)

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