

MODIFIED PAG-IBIG (MP2) ENROLLMENT



ENROLLMENT FOR MODIFIED Pag-IBIG II (MP2)

Pag-IBIG MID No. : **1211 7962 1336**

Name : **ABAD, THERESE MARIE BELONGUEL**

Date of Birth: **December 11, 1997**

T. I. N. :

Present Home Address : **296-M GONZALES COMPOUND, KAMPUTHAW, CEBU CITY, CEBU 6000**

Mobile Phone No. :

Home Tel. No. :

E-mail Address : **thereseabad@gmail.com**

* Monthly Income :

I hereby undertake to contribute monthly the amount of * (Desired Monthly Contribution) as my savings under the Modified Pag-IBIG II program.

Company/Employer Name : **IPLOY STAFFING SOLUTIONS**

Company/Employer Address : **11TH Lot 3 Block 6 MSY TOWER, PESCADORES ROAD, CEBU CITY, CEBU 6000**

TERMS AND CONDITIONS

1. The Modified Pag-IBIG II membership is open to all Pag-IBIG 1 members only.
2. Membership under this program shall be solely a savings scheme.
3. Membership Term under this program shall be 5 years reckoned from date of initial payment of contributions under this program.
4. The member shall be entitled to annual dividends to be credited to his/her account in accordance with HDMF policies.
5. The member shall be entitled to receive his/her total savings (TAV) upon maturity.
6. Upon maturity, a member may opt to renew his/her Modified Pag-IBIG II membership for another five (5) years.
7. Unless withdrawn or renewed at maturity, the member shall be entitled to dividend rates subject to the Fund's existing policies.
8. The member shall promptly notify HDMF in writing of any change in address and civil status and personally fill-out Change of Information form.

By clicking the Submit button below, I will comply with the above undertaking and I hereby agree to be governed by the foregoing terms and conditions.