

General Instructions:

- SUBMIT **ONE (1) LONG FOLDER** of **ORIGINAL** and **ONE (1) LONG FOLDER** of **PHOTOCOPIED** and properly tabbed to each document
- Whenever any discrepancy exists on name, birth date and other information, submit an Affidavit of 2 Disinterested Persons or Correction of Entry on the civil registry document (Birth / Marriage / Death Certificate), whichever is applicable
- Incomplete submission shall NOT be entertained
- Photocopied documents must be clear and readable.
- Transact only with authorized employees from AFPTFPD/AFPPGMC. **Beware of FIXERS.** (Republic Act 9485 (Anti-Red Tape Law) imposes stiff penalties on fixers, such as imprisonment of as long as six (6) years, or fine of up to P200,000, or both.)
- Submission of **FAKE DOCUMENTS** will be prosecuted for Falsification of Public Documents and violation of Section 34 of PD 1638.

Note: Kindly secure and complete documentary requirements as applicable.

REQUIREMENTS		WHERE TO SECURE
AFP LEGAL FORMS		
1	Affidavit of Undertaking with Special Power of Attorney	Download at https://www.afppgmc-mil.ph
2	Oath of Office	
3	Affidavit of Self-Adjudication (Sole Heir/Claimant only)	
BASIC DOCUMENTS		
1	Waiver of Rights	Download sample format at https://www.afppgmc-mil.ph
2	Duly Accomplished Application Form	Download at https://www.afppgmc-mil.ph
PSA DOCUMENTS		
1	PSA Death Certificate of Principal Pensioner and his/her Spouse, <i>if deceased</i>	Philippine Statistics Authority (PSA) thru: 1. PSA Serbilis via https://www.psaserbilis.com.ph with " Delivery To " option to AFP Pension and Gratuity Management Center (see next page) or 2. Local Civil Registrar (LCR), if no record in PSA, with Official Receipt (OR)
2	PSA Marriage Certificate of Principal Pensioner and his/her Spouse	
3	PSA CRS Form #5 (Advisory on Marriages) of both: -Principal Pensioner and -his/her Spouse	
4	PSA Birth Certificate/s of Child/ren and/or Grandchild/ren, <i>if by representation</i>	
5	PSA Birth Certificate of Principal Pensioner, <i>if single upon death</i>	
OTHER REQUIREMENTS		
1	Photocopy of valid Government ID (front and back) of all claimants with 3 specimen signatures	Claimant/s
2	Photocopy of ATM Account (LBP, PVB, or DBP) with handwritten Account Number and bank snapshot (<i>only for claims administrator who are not AFP pensioners</i>)	Claims Administrator / Bank
ADDITIONAL REQUIREMENTS FOR DUAL CITIZEN DECEASED PRINCIPAL PENSIONER / ACTIVE BENEFICIARY CLAIMANT/S		
1	Certificate of Naturalization (Photocopy only)	Immigration & Naturalization Services of Foreign Country
2	Oath of Allegiance (Photocopy only)	Philippine Embassy/ Consulate / Department of Foreign Affairs
3	Order of Approval of Citizenship Retention and Re-acquisition (Photocopy only)	
4	Identification Certificate (Photocopy only)	

Request Details

Certificate Type: Birth
Type of Request: Copy Issuance
Number of Copies: 1

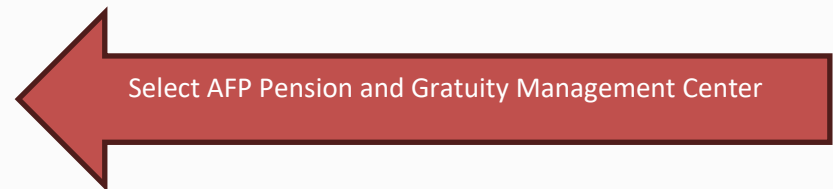
Certificate Details

ⓘ Please enter Maiden Name, if Married Female

Last Name: Last Name
First Name: First Name
Middle Name: Middle Name
Place of Birth (Country): PHILIPPINES
Place of Birth (Province): Select Province
Place of Birth (City/Municipality): Select City/Municipality
Date of Birth: MM/DD/YYYY
Sex: Male Female
Father's Last Name: Father's Last Name
Father's First Name: Father's First Name
Father's Middle Name: Father's Middle Name
Mother's Maiden Last Name: Mother's Last Name
Mother's Maiden First Name: Mother's First Name
Mother's Maiden Middle Name: Mother's Middle Name
Relationship to the Document Owner: Select Relationship to the Document Owner

Embassy or Government Agency Details

Document(s) for delivery to an Embassy or Government Agency?: Yes No
Delivery To: AFP Pension and Gratuity Management Center



**APPLICATION FOR MONIES CLAIMS OR ONE-TIME
PAYMENT FOR AFP PENSION DIFFERENTIAL FY2000 - 13**

<i>CLAIMS ADMINISTRATOR</i>					
NAME OF DESIGNATED CLAIMS ADMINISTRATOR: <i>(Print information in capital letters & use BLUE ink only)</i>					
(Last Name)		(First Name)		(Middle Name)	(Suffix: Jr, III, IV if any)
Date of Birth:		Contact No: (Cellular phone)		Relationship to the deceased principal Pensioner/Retiree	

<i>OTHER BENEFICIARIES</i>			
Names of other Legal Beneficiaries	Date of Birth	Contact No.	Relationship to the Deceased Pensioner

**With Additional Sheet: Yes No*

I _____ DO CERTIFY THAT THE INFORMATION I HAVE PROVIDED ARE TRUE AND CORRECT, AND I FURTHER CERTIFY THAT:

1. I am the sole or one of the legal beneficiary/ies of the deceased military personnel.
2. I have not filed any previous application for Monies Claims or One-Time payment pertaining to the AFP Pension Differential covering the period of FY2000 – 2013.
3. I will immediately notify the AFPPGMC or the AFP Task Force for Pension Differential (FY2000-2013) in case changes of status or other claimants will assert benefits of the deceased AFP Pensioner.

SIGNATURE OF DESIGNATED ADMINISTRATOR	DATE
<i>Witnesses:</i>	
(Signature over printed name)	<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 80%;"> 2 x 2 Picture of the Pension Administrator </div>
(Signature over printed name)	

