|  |  | 1st           |             | nd        | 3rd      |           | 4th      |           | Annual   |  |
|--|--|---------------|-------------|-----------|----------|-----------|----------|-----------|----------|--|
| Name VERGEL AQUINO CRUZ                                  | PHP Peso   | US Dollar     | PHP Peso    | US Dollar | PHP Peso | US Dollar | PHP Peso | US Dollar | PHP Peso | US Dolla                               |
| TIN No. 113-576-033                                      |  | <u> </u>      |             | L         |          |           |          |           |          | as some                                |
| Name of Agency   |  | ļ             |             |           |          |           |          |           |          |  |
| (Indicate whether Mother Unit or Ex-Officio Member)      |  | <del> </del>  |             |           |          |           |          |           |          |  |
| Position/Designation Director                            |  |               |             |           |          |           |          |           |          |  |
| Months Served 12   |  |               | <u></u>     |           |          |           |          |           |          |  |
| Basic Salary   |  |               |             |           |          |           |          |           |          |  |
| Allowances and Other Benefits                            |  |               |             |           |          |           |          |           |          | ······································ |
| PERA/ADCOM   |  |               |             |           |          |           |          |           |          | <del></del>                            |
| Per Diem on Board Meetings                               |  | ļi            |             |           |          |           |          |           |          | · · · · · · ·                          |
| Honorarium   | 54,000   |               | 98,000      |           | 66,000   |           | 60,000   |           | 278,000  |  |
| Representation Allowance                                 |  |               |             |           |          |           |          |           | 270,000  |  |
| Transportation Allowance                                 | <del></del>                                      |               |             |           |          |           |          |           |          |  |
| Gasoline Allowance                                       |  |               |             |           |          |           |          |           |          | <del></del>                            |
| Food Subsidry  | -  |               |             |           |          |           |          |           |          |  |
| Longevity Pay  | <b>-</b>   |               |             |           |          |           |          |           |          | <del></del>                            |
| Amelioration Allowance                                   |  |               |             |           |          |           |          |           |          |  |
| Clothing/Uniform   |  |               |             |           |          |           |          |           |          |  |
| Medical Benefits   | <del>- </del> -                                  |               |             |           |          |           |          |           |          |  |
| Bonus and Incentives (PBI)                               | <del>-  </del> -                                 |               |             |           |          |           |          |           | `        |  |
| Dependent's Allowance                                    |  |               | 180,800     |           |          |           |          |           | 180,800  |  |
| Others   | <del></del>                                      | ——            |             |           |          |           |          |           |          |  |
| (1) PYs Adjustments (state whether salaries, or allowand |  |               |             |           |          |           |          |           |          |  |
| (2)  | es/incentives                                    | (indicate kin | d), others) |           |          |           |          |           |          |  |
| (etc)  | <del></del>                                      |               |             |           |          |           |          |           |          | ·                                      |
| Indirect Benefits:                                       | <del>- -</del>                                   |               |             |           |          |           |          |           |          |  |
| (1) Subsistence  | +  | <del></del>   |             |           |          |           |          |           |          |  |
| (2) Laundry  | <del>- </del>                                    |               |             |           |          |           |          |           |          |  |
| (3) Quarters   | <del>                                     </del> |               | <del></del> |           |          |           | T        |           |          | ······                                 |
| (4) Provident Fund - Employer share                      |  |               |             |           |          |           |          |           |          | · · · · · · · · · · · · · · · · · · ·  |
| (5) Other similar allowances                             | <del>  </del>                                    |               |             |           |          |           |          |           |          |  |
| Sub-Total  | 54,000   |               | 270 000     |           |          |           |          |           |          |  |
| Add: EMEs (previously entitled Discretionary Fund)       | 1 04,000   | <del></del>   | 278,800     |           | 66,000   |           | 60,000   |           | 458,800  |  |
| Total  | 54,000   |               | 279 900     |           |          |           |          |           |          |  |
|  | 34,000   | <u> </u>      | 278,800     |           | 66,000   |           | 60,000   |           | 458,800  |  |

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| Prepared by:   | Verified by:                                       |
|--|--|
| Shirley A. Palapal, Accounting Head  Name and designation  E-mail address: shirley.palapal@lbp-insurance.com  Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |
| ∂ate:  | Date:  |

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- 6. If the principal officers, members of the governing board, Secretary, Undersecretary or Assistant Secretary did not receive any salary and/or allowance/s during the year, the name should be included in the list but with the information as not having received such salary and/or allowance for that year.

  7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board
- in his mother unit and from those served as ex-officio member of other agencies.

For the four (4) quarters of 2016 Znď 3rd Annuai PHP Peso US Dollar Name DAVID PAANOD CORPIN TIN No. 142-813-087 Name of Agency (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation Director Months Served Basic Salary Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 66,000 58,000 42,000 66,000 232,000 Honorarium Representation Allowance Transportation Allowance Gasoline Allowance Food Subsidry Longevity Pay Amelioration Allowance Clothing/Uniform Medical Benefits Bonus and Incentives (PBI) 133,500 133,500 Dependent's Allowance Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2) (etc) Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total 66,000 191,500 42,000 66,000 365,500 Add: EMEs (previously entitled Discretionary Fund) 66,000 191,500 42,000 66,000 365,500

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| Shirley A. Palapal, Accounting Head  Name and designation E-mail address: shirley.palapal@lbp-insurance.com Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No, |
| Date:  | Date:  |

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- 7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board in his mother unit and from those served as ex-officio member of other agencies.

| For the four (4) quarters of 2016  |             |               |               |             |          |  |  |             |             |           |
|--|-------------|---------------|---------------|-------------|----------|--|--|-------------|-------------|-----------|
|  |             | 1st           |               | 2nd         |          | 3rd  |  | 4th         |             | nual      |
| Name GERMAN DELOS SANTOS CACCAM  | PHP Peso    | US Dollar     | PHP Peso      | US Dollar   | PHP Peso | US Dollar  |  |             | PHP Peso    | US Dollar |
| THE STATE OF THE S |             |               |               |             |          | <del>                                     </del> |  |             | 1           | DO DONIE  |
|  |             |               |               |             |          |  | <del>                                     </del> | <del></del> | <del></del> |           |
| Name of Agency   |             |               |               |             |          | <del> </del>                                     | <del></del>                                      | <del></del> |             |           |
| (Indicate whether Mother Unit or Ex-Officio Member)  |             |               |               |             |          | <u> </u>   |  |             | <u> </u>    |           |
| Position/Designation Director Months Served 12   |             |               |               |             |          |  | ļ ———  |             |             |           |
|  |             |               |               | -           |          |  |  |             | <u> </u>    |           |
| Basic Salary   |             |               |               |             |          |  |  |             |             |           |
| Allowances and Other Benefits  |             |               |               |             |          |  |  |             |             |           |
| PERA/ADCOM   |             |               |               | — ·—        |          |  |  |             |             |           |
| Per Diem on Board Meetings   | 72,000      |               | 68,000        |             | 42,000   |  | 66.000   |             |             |           |
| Honorarium   |             |               | 50,000        |             | 42,000   |  | 66,000   |             | 248,000     |           |
| Representation Allowance   |             |               |               |             |          |  |  |             |             |           |
| Transportation Allowance   |             |               |               |             |          |  |  |             |             |           |
| Gasoline Allowance   |             |               |               |             |          |  |  |             |             |           |
| Food Subsidry  |             |               |               |             |          |  |  |             |             |           |
| Longevity Pay  |             |               |               |             |          |  |  |             |             |           |
| Amelioration Allowance   |             |               |               |             |          |  |  |             |             |           |
| Clothing/Uniform   |             |               |               |             |          | <u> </u>   |  |             |             |           |
| Medical Benefits   |             |               |               |             |          |  |  |             |             |           |
| Bonus and Incentives (PBI)   |             |               | 142,400       |             |          |  |  |             |             |           |
| Dependent's Allowance  |             |               | 142,400       | <del></del> |          |  |  |             | 142,400     |           |
| Others   |             |               |               | <del></del> |          |  |  |             |             |           |
| (1) PYs Adjustments (state whether salaries, or allowances   | /incentives | (indicate kin | d) others)    |             |          |  |  |             |             |           |
| (2)  | ,           | Andrease Kill | u, ouers      |             |          |  |  |             |             |           |
| (etc)  |             |               |               |             |          |  |  |             |             |           |
| Indirect Benefits:   |             |               | <del></del> [ | <del></del> |          |  |  |             |             |           |
| (1) Subsistence  |             |               |               | <b></b>     |          | <del></del>                                      |  |             |             |           |
| (2) Laundry  |             |               |               |             |          |  |  |             |             |           |
| (3) Quarters   |             |               |               |             |          |  |  |             |             |           |
| (4) Provident Fund - Employer share  |             |               | <del></del>   |             |          |  |  |             |             |           |
| (5) Other similar allowances   |             | <del></del>   |               | <del></del> |          |  | — <del>-</del>                                   |             |             |           |
| Sub-Total  | 72,000      |               | 210,400       |             | 40.000   |  |  |             |             |           |
| Add: EMEs (previously entitled Discretionary Fund)   | . 2,000     |               | Z 10,400      | <del></del> | 42,000   |  | 66,000   |             | 390,400     |           |
| Total  | 72,000      |               | 210,400       |             | 42 000   |  |  |             |             |           |
|  | . =,000     |               | £10,400       | <u> </u>    | 42,000   |  | 66,000   |             | 390,400     |           |

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|--|--|--|
| Shirley A. Palapal, Accounting Head  Name and designation  E-mail address: shirley.palapal@lbp-insurance.com  Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |  |
| Date:  | Date:  |  |

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- 7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board in his mother unit and from those served as ex-officio member of other agencies.

| For the four (4) quarters of 2016                          |               |               |             |               |             |             |        |             |          |           |
|--|---------------|---------------|-------------|---------------|-------------|-------------|--------|-------------|----------|-----------|
|  |               | lst           |             | nd            |             | rd          | 4th    |             | Anı      | nual      |
| Nowa TEDERITA FORMAN                                       | PHP Peso      | US Dollar     | PHP Peso    | US Dollar     | PHP Peso    | US Dollar   |        |             | PHP Peso | US Dollar |
| Name TERESITA ESMAMA CHENG TIN No. 138-050-431             |               |               | L           |               |             |             |        |             | 7711     | 93 20:101 |
| 100 004 102  | <u> </u>      |               |             |               |             |             |        |             |          |           |
| Name of Agency LBP   |               |               |             |               |             |             |        |             |          |           |
| (Indicate whether Mother Unit or Ex-Officio Member)        |               |               |             |               |             |             |        |             |          |           |
| Position/Designation Director                              |               | - "           |             |               |             |             |        |             |          |           |
| Months Served 11   |               |               |             |               |             |             |        |             |          |           |
| Basic Salary   |               |               |             |               |             |             |        |             |          |           |
| Allowances and Other Benefits                              |               |               |             |               |             |             |        |             |          |           |
| PERA/ADCOM   |               |               |             |               |             |             |        |             |          |           |
| Per Diem on Board Meetings                                 | 66,000        |               | 62,000      |               | 48,000      |             | 24.000 |             |          |           |
| Honorarium   |               | -             | 02,000      |               | 40,000      |             | 34,000 |             | 210,000  |           |
| Representation Allowance                                   |               |               |             |               |             |             |        |             |          |           |
| Transportation Allowance                                   |               |               |             |               |             |             |        |             |          |           |
| Gasoline Allowance   |               |               |             |               |             | <del></del> |        |             |          |           |
| Food Subsidry  |               |               |             |               |             |             |        |             |          |           |
| Longevity Pay  |               |               |             |               |             |             |        |             |          |           |
| Amelioration Allowance                                     |               |               |             |               |             |             |        |             |          |           |
| Clothing/Uniform   |               |               |             | <del></del>   |             |             |        |             |          |           |
| Medical Benefits   |               |               |             |               |             |             | ···    |             |          |           |
| Bonus and Incentives (PBI)                                 |               |               | 116,800     |               |             |             |        |             |          | ·         |
| Dependent's Allowance                                      |               |               | 7.40,000    |               |             |             |        |             | 116,800  | ·         |
| Others   |               |               |             | <del></del>   |             |             |        |             |          |           |
| (1) PYs Adjustments (state whether salaries, or allowances | /incentives   | (indicate kin | d) othors)  |               |             |             |        |             |          |           |
| (2)  | , indentities | Indicate Kill | uj, Othersj |               |             |             |        |             |          |           |
| (etc)  |               |               |             |               | <del></del> |             |        |             |          |           |
| Indirect Benefits:   |               |               |             |               |             |             |        |             |          |           |
| (1) Subsistence  |               |               |             | <del></del> [ |             | <del></del> |        |             |          |           |
| (2) Laundry  |               |               |             | <del></del>   |             | <del></del> |        |             | i        |           |
| (3) Quarters   |               |               | <del></del> |               |             |             |        |             |          |           |
| (4) Provident Fund - Employer share                        |               |               | <del></del> |               | <del></del> |             |        |             |          |           |
| (5) Other similar allowances                               |               |               | <del></del> |               |             |             |        |             |          |           |
| Sub-Total Sub-Total  | 66,000        |               | 178,800     |               | 48,000      |             | 24.000 |             |          |           |
| Add: EMEs (previously entitled Discretionary Fund)         | 1             |               | 110,000     | <del></del>   | 40,000      |             | 34,000 | <del></del> | 326,800  |           |
| Total  | 66,000        |               | 178,800     |               | 48,000      |             | 34,000 |             | 200 000  |           |
|  |               |               |             |               | -10,000     |             | 34,000 |             | 326,800  |           |

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|--|--|
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| Oate:  | Date:  |

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For the four (4) quarters of 2016 2nd 3rd 4th Annual PHP Peso US Dollar DAISY MONTALBO MACALINO Name TIN No. 138-054-370 Name of Agency IRP (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation Director Basic Salary Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 20,000 62,000 26,000 36,000 144,000 Honorarium Representation Allowance Transportation Allowance Gasoline Allowance Food Subsidry Longevity Pay Amelioration Allowance Clothing/Uniform Medical Benefits Bonus and Incentives (PBI) Dependent's Allowance Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2) (etc) Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total 20,000 62,000 26,000 36,000 144,000 Add: EMEs (previously entitled Discretionary Fund)

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|--|--|--|
| Shirley A. Palapal, Accounting Head  Name and designation  E-mail address: shirley.palapal@lbp-insurance.com  Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |  |
| Date:  | Date:  |  |

62,000

26,000

36,000

144,000

# Instructions:

Total

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20,000

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For the four (4) quarters of 2016 1st 2nd 3rd Annual PHP Peso US Dollar PHP Peso US Dollar PHP Peso | US Dollar | PHP Peso | US Dollar PHP Peso US Dollar Name ALAN VIDAMO BORNAS TIN No. 120-157-672 Name of Agency LRP (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation Director Basic Salary Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 30,000 46,000 36,000 30,000 142,000 Honorarium Representation Allowance Transportation Allowance Gasoline Allowance Food Subsidry Longevity Pay Amelioration Allowance Clothing/Uniform Medical Benefits Bonus and Incentives (PBI) 105,600 105,600 Dependent's Allowance Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2) (etc) Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total 151,600 30,000 36,000 30,000 247,600 Add: EMEs (previously entitled Discretionary Fund) Total 30,000 151,600 36,000 30,000 247,600

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For the four (4) quarters of 2016 1st 2nd 3rd 4th Annual PHP Peso US Dollar PHP Peso US Dollar PHP Peso US Dollar PHP Peso US Dollar PHP Peso | US Dollar Name REYNAULD RUIZ VILLAFUERTE TIN No. 120-152-808 Name of Agency LBP (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation Director
Months Served 12 Basic Salary Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 54,000 98,000 66,000 60,000 Honorarium 278,000 Representation Allowance Transportation Allowance **Gasoline Allowance** Food Subsidry **Longevity Pay** Amelioration Allowance Clothing/Uniform Medical Benefits Bonus and Incentives (PBI) 201,600 Dependent's Allowance 201,600 Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2)(etc) Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total 54,000 299,600 Add: EMEs (previously entitled Discretionary Fund) 66,000 60,000 479,600 Total 54,000 299,600 66,000 60,000 479,600

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|--|--|
| Shirley A. Palapal, Accounting Head  Name and designation  E-mail address: shirley.palapal@lbp-insurance.com  Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |
| Date:  | Date:  |

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- 2. Taxpayer's identification No. (TIN) of recipients should be properly disclosed.
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- 5. Breakdown each type of Other Allowances/Benefits.
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|  | 1st  |               | 2nd         |           | 3rd      |  | 4th        |             |             |             |
|--|--|---------------|-------------|-----------|----------|--|------------|-------------|-------------|-------------|
| Name YOLANDA DILI AGUE VELASCO                             | PHP Peso   | US Dollar     | PHP Peso    | US Dollar | PHP Peso |  | PHP Peso   |             |             | nual        |
| TELEGOOD TELEGOOD  |  |               |             |           |          |  | 1111 7 630 | O2 DOUGE    | PHP Peso    | US Dolla    |
|  | L  |               |             |           |          |  |            |             |             | ļ <u></u>   |
| Name of Agency LBP   |  |               |             |           |          | <del>                                     </del> |            |             |             |             |
| (Indicate whether Mother Unit or Ex-Officio Member)        |  |               |             |           |          | <del></del>                                      |            |             |             |             |
| Position/Designation Director                              |  |               |             |           |          |  |            |             |             |             |
| Months Served 12   |  |               |             |           |          | <del> </del>                                     |            |             |             |             |
| Basic Salary   |  |               | <del></del> |           |          |  |            |             |             |             |
| Allowances and Other Benefits                              | <del>                                     </del> |               |             |           |          |  |            |             |             |             |
| PERA/ADCOM   | <del>  </del>                                    |               |             |           | ·        |  |            |             |             |             |
| Per Diem on Board Meetings                                 | 54,000   |               |             |           |          |  |            |             |             |             |
| Honorarium   | 34,000   | <del></del>   | 80,000      |           | 48,000   |  | 60,000     |             | 242,000     |             |
| Representation Allowance                                   | <del> </del>                                     |               |             |           |          |  |            |             |             |             |
| Transportation Allowance                                   | <del>   </del>                                   |               |             |           |          |  |            |             |             |             |
| Gasoline Allowance   | <del> </del>                                     |               |             |           |          |  |            |             |             | -           |
| Food Subsidry  | <del></del>                                      |               |             |           |          |  |            |             |             |             |
| Longevity Pay  | <del></del>                                      |               |             | i         |          |  |            |             |             |             |
| Amelioration Allowance                                     | <b>-</b>   |               |             |           |          |  |            |             |             |             |
| Clothing/Uniform   | +  |               |             |           |          |  |            |             |             | <del></del> |
| Medical Benefits   |  |               |             |           |          |  |            |             |             |             |
| Bonus and Incentives (PBI)                                 |  |               |             |           |          |  |            |             |             |             |
| Dependent's Allowance                                      |  |               | 180,800     |           |          |  |            |             | 180,800     |             |
| Others   | <del></del>                                      |               |             |           |          |  |            |             |             |             |
| (1) PYs Adjustments (state whether salaries, or allowances | /  |               |             |           |          |  |            |             |             | <del></del> |
| (2)  | /incentives (                                    | indicate kind | i), others) |           |          |  |            |             |             |             |
| (etc)  |  | <u>-</u>      |             |           |          |  |            |             |             |             |
| Indirect Benefits:   | <del></del> -                                    | — <u> </u> -  | i           |           |          |  |            |             |             |             |
| (1) Subsistence  |  | -             |             |           |          |  |            |             |             |             |
| (2) Laundry  |  |               |             |           |          |  |            |             | ·           |             |
| (3) Quarters   |  |               |             |           |          |  |            |             |             |             |
| (4) Provident Fund - Employer share                        | <del></del>                                      |               |             |           |          |  |            |             |             |             |
| (5) Other similar allowances                               |  |               |             |           |          |  |            |             | <del></del> |             |
| Sub-Total  | 64.000   |               |             |           |          |  |            |             |             |             |
| Add: EMEs (previously entitled Discretionary Fund)         | 54,000   |               | 260,800     |           | 48,000   |  | 60,000     |             | 422,800     |             |
| Total  | E4.000   |               |             |           |          |  |            |             | ,           |             |
|  | 54,000   |               | 260,800     |           | 48,000   |  | 60,000     | <del></del> | 422,800     |             |

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| Prepared by:  | Verified by:                                       |
|---|--|
| Shirley A. Palapal, Accounting Head Name and designation E-mail address: shirley.palapal@lbp-insurance.com Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |
| Date:   | Date:  |

- 1. All names of the recipients should be complete. (given name, middle name and surname).
- 2. Taxpayer's identification No. (TIN) of recipients should be properly disclosed.
- 3. For officials who are ex-officio members of the reporting agency, please indicate the mother unit of said ex-officio official.

  4. All figures should be rounded off to the nearest centavo of the total amount received.
- 5. Breakdown each type of Other Allowances/Benefits.
- 6. If the principal officers, members of the governing board, Secretary, Undersecretary or Assistant Secretary did not receive any salary and/or allowance/s during the year, the name should be included in the list but with the information as not having received such salary and/or allowance for that year.
- 7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board in his mother unit and from those served as ex-officio member of other agencies.

|   |  | 1st            |                | 2nd         |          | 3rd       |          | 4th      |          | Annual    |  |
|---|--|----------------|----------------|-------------|----------|-----------|----------|----------|----------|-----------|--|
| Name DENNIS PEREZ DINGLASAN                               | PHP Peso   | US Dollar      | PHP Peso       | US Dollar   | PHP Peso | US Dollar | PHP Peso |          | PHP Peso |           |  |
| - EILE BIIVOLASAIV  |  |                |                |             |          |           |          | oo bona, | TIM FESO | 03 00118  |  |
|   |  |                |                |             | -        |           |          |          |          | <b></b>   |  |
| Name of Agency LBP  |  |                |                |             |          |           |          |          |          |           |  |
| (Indicate whether Mother Unit or Ex-Officio Member)       |  |                |                |             |          |           |          |          |          | <b></b> - |  |
| Position/Designation Corporate Secretary Months Served 12 |  |                |                |             |          |           |          |          |          |           |  |
| **************************************                    |  |                |                |             |          |           |          |          |          | <b></b>   |  |
| Basic Salary  |  |                |                |             |          |           |          |          |          |           |  |
| Allowances and Other Benefits                             |  |                |                |             |          |           |          |          |          | -         |  |
| PERA/ADCOM  |  |                |                |             |          |           |          |          |          |           |  |
| Per Diem on Board Meetings                                | 24,000   |                | 48,000         |             | 20.000   |           |          |          |          |           |  |
| Honorarium  | 1,500  |                | 48,000         |             | 36,000   |           | 32,000   |          | 140,000  | 1         |  |
| Representation Allowance                                  | <del></del>                                      |                |                |             |          |           |          |          |          |           |  |
| Transportation Allowance                                  | <del></del>                                      |                |                |             |          |           |          |          |          |           |  |
| Gasoline Allowance  |  |                |                |             |          |           |          |          |          |           |  |
| Food Subsidry   |  |                |                |             |          |           |          |          |          |           |  |
| Longevity Pay   |  |                |                |             |          |           |          |          |          |           |  |
| Amelioration Allowance                                    |  |                |                |             |          |           |          |          |          |           |  |
| Clothing/Uniform  |  |                |                |             |          |           |          |          |          |           |  |
| Medical Benefits  | <del> </del> -                                   |                | <del></del>    | <del></del> |          |           |          |          |          |           |  |
| Bonus and Incentives                                      |  |                | — <del> </del> |             |          |           |          |          |          |           |  |
| Dependent's Allowance                                     |  |                | <del></del>    |             |          |           |          |          |          |           |  |
| Others  | ~ <del> </del>                                   |                | — <u>-</u> ∤   |             |          |           |          |          |          |           |  |
| (1) PYs Adjustments (state whether salaries, or allowand  | as/incantivas                                    | (indianta lii- |                | ·           |          |           |          |          |          |           |  |
| (2) Reimburable expenses                                  | 12.000   | (moleate Kill  |                | <u>-</u>    |          |           |          |          | }        |           |  |
| (etc)   | 12,000   |                | 12,000         |             | 12,000   |           | 12,000   |          | 48,000   |           |  |
| Indirect Benefits:  | <del>                                     </del> |                |                |             |          |           |          |          |          |           |  |
| (1) Subsistence   |  |                |                |             |          |           |          |          |          |           |  |
| (2) Laundry   | <del></del>                                      |                |                |             |          |           |          |          |          |           |  |
| (3) Quarters  | <del>                                     </del> | <del></del>    |                |             |          |           |          |          |          |           |  |
| (4) Provident Fund - Employer share                       | <del></del>                                      |                |                |             |          |           |          |          |          |           |  |
| (5) Other similar allowances                              | <del>-  </del>                                   |                |                |             |          |           |          |          |          |           |  |
| Sub-Total   | 12,000   |                | 12,000         |             |          |           |          |          |          |           |  |
| dd: EMEs (previously entitled Discretionary Fund)         | 12,000   |                | 12,000         |             | 12,000   |           | 12,000   |          | 48,000   |           |  |
| otal  | 36,000   |                | 60,000         |             | 48,000   |           | 44,000   |          | 188,000  |           |  |

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|--|--|
| Shirley A. Palapal, Accounting Head  Name and designation  E-mail address: shirley.palapal@lbp-insurance.com  Tel. No. 8171564 | Name and designation<br>E-mail address<br>Tel. No. |
| Date:  | Date:  |

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- 5. Breakdown each type of Other Allowances/Benefits.
- 6. If the principal officers, members of the governing board, Secretary, Undersecretary or Assistant Secretary did not receive any salary and/or allowance/s during the year, the name should be included in the list but with the information as not having received such salary and/or allowance for that year.
- 7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board in his mother unit and from those served as ex-officio member of other agencies.

For the four (4) quarters of 2016 2nd 3rd Annual PHP Peso US Dolla PHP Peso US Dollar PHP Peso US Dollar PHP Peso | US Dollar | PHP Peso US Dollar Name GEORGE REGALA FRANCISCO TIN No. 100-120-657 Name of Agency LBP INSURANCE BROKERAGE, INC. (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation General Manager / Pres. and CEO Basic Salary 373,200 373,200 311,000 62,200 1,119,600 Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 38,000 68,000 48,000 154,000 Honorarium Representation Allowance 36,000 27,000 18,000 6,750 87,750 Transportation Allowance Gasoline Allowance Food Subsidry 6,900 7.200 6,900 21,000 Longevity Pay Amelioration Allowance Clothing/Uniform 5,000 5,000 Medical Benefits 13,000 (3,250)9,750 Monetization of VL & SL 220,202 220,202 Bonus and Incentives (1) PBI (2) PBB 311,000 311,000 (3) 13th & 14th month pay 124,400 62,200 186,600 (4) Cash gift 2,500 2.500 (5) Anniversary bonus 8,000 8,000 Dependent's Allowance Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2) Reimburable expenses 30,000 30,000 30,000 90,000 (3) Christmas raffle Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total Add: EMEs (previously entitled Discretionary Fund) 497,100 943,300 421,900 353,102 2,215,402 497,100 943,300 421,900 353,102 2,215,402

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|--|--|
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For the four (4) quarters of 2016 2nd 3rd Annuat PHP Peso US Dollar PHP Peso US Dollar PHP Peso | US Dollar PHP Peso | US Dollar PHP Peso | US Dollar Name TOMAS TARNATE DE LEON TIN No. 100-120-657 Name of Agency LBP (Indicate whether Mother Unit or Ex-Officio Member) Position/Designation OIC / Chairperson Months Served 3 /12 Basic Salary Allowances and Other Benefits PERA/ADCOM Per Diem on Board Meetings 60,000 90,000 72,000 66,000 288,000 Honorarium Representation Allowance Transportation Allowance Gasoline Allowance Food Subsidry Longevity Pay Amelioration Allowance Clothing/Uniform Medical Benefits Bonus and Incentives (1) PBI Dependent's Allowance Others (1) PYs Adjustments (state whether salaries, or allowances/incentives (indicate kind), others) (2) Reimburable expenses 32,500 32,500 (etc) Indirect Benefits: (1) Subsistence (2) Laundry (3) Quarters (4) Provident Fund - Employer share (5) Other similar allowances Sub-Total 60,000 90,000 72,000 98,500 320,500 Add: EMEs (previously entitled Discretionary Fund) Total 60,000 90,000 72,000 98,500 320,500

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- 7. Disclose the exact number of months (numerical total) served by each officer/s and members of the governing board in his mother unit and from those served as ex-officio member of other agencies.

# Retention and disposal of data

Information will be kept in line with our document retention guidelines. All employees are responsible for ensuring that information is not kept for longer than necessary.

Documents containing any personal information will be disposed of securely, and paper copies will be shredded.