



**AFP RETIREMENT AND SEPARATION BENEFITS SYSTEM**

**Posthumous Claims**

<b>CHECKLIST OF DOCUMENTARY REQUIREMENTS</b>																									
1.	• Duly accomplished <b>Application Form</b>																								
2.	• Duly accomplished <b>Member's Information Sheet</b>																								
3.	• Original or Authenticated Copy of <b>Posthumous Retirement / Separation Order</b> or Original Copy of <b>Death Certificate</b> with NSO Official Receipt																								
4.	• Original or Authenticated Copy of <b>Statement of Service (S.O.S.)</b> issued by the Major Service Adjutant indicating the purpose "For RSBS Reference"																								
5.	• Original or Authenticated Copy of <b>Certificate of Last Payment</b> or Original or Authenticated Copy of <b>Latest Payslip</b> or Original <b>Statement of Earnings and Deductions</b> for one month duly signed by AFP / Major Service Finance Center																								
6.	• Original or Authenticated Copy of <b>Declaration of Legal Beneficiaries</b> issued by JAGO																								
7.	• Original or Authenticated Copy of <b>Certification of Legal Beneficiaries</b> issued by the Major Service Adjutant																								
8.	• Original PSO-Certified <b>Birth Certificate</b> with Official Receipt (for legal beneficiaries 18 yrs old and above)																								
9.	<p>• Original and Photocopy (back to back) of two (2) <b>valid IDs</b> with picture and with <u>three specimen signature of each claimant/beneficiary affixed on the photocopy</u>. IDs shall be any two (inclusive of one primary valid ID) of the following:</p> <table border="0"> <tr> <td><b><u>Primary Valid IDs</u></b></td> <td><b><u>Secondary Valid IDs</u></b></td> </tr> <tr> <td><input type="checkbox"/> Military Dependent's ID</td> <td><input type="checkbox"/> AFPSLAI ID      <input type="checkbox"/> AFP MBAI</td> </tr> <tr> <td><input type="checkbox"/> Legal Beneficiary's ID</td> <td><input type="checkbox"/> Other AFP FI's ID</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SSS ID              <input type="checkbox"/> PHILHEALTH</td> </tr> <tr> <td></td> <td><input type="checkbox"/> HDMF ID           <input type="checkbox"/> GSIS ID</td> </tr> <tr> <td></td> <td><input type="checkbox"/> PASSPORT        <input type="checkbox"/> BIR TIN ID</td> </tr> <tr> <td></td> <td><input type="checkbox"/> COMPANY ID      <input type="checkbox"/> PRC ID</td> </tr> <tr> <td></td> <td><input type="checkbox"/> COMELEC ID</td> </tr> <tr> <td></td> <td><input type="checkbox"/> LTO Driver's License</td> </tr> <tr> <td></td> <td>Other Government-issued IDs with signature &amp; photo</td> </tr> <tr> <td></td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td></td> <td><input type="checkbox"/> _____</td> </tr> </table>	<b><u>Primary Valid IDs</u></b>	<b><u>Secondary Valid IDs</u></b>	<input type="checkbox"/> Military Dependent's ID	<input type="checkbox"/> AFPSLAI ID <input type="checkbox"/> AFP MBAI	<input type="checkbox"/> Legal Beneficiary's ID	<input type="checkbox"/> Other AFP FI's ID		<input type="checkbox"/> SSS ID <input type="checkbox"/> PHILHEALTH		<input type="checkbox"/> HDMF ID <input type="checkbox"/> GSIS ID		<input type="checkbox"/> PASSPORT <input type="checkbox"/> BIR TIN ID		<input type="checkbox"/> COMPANY ID <input type="checkbox"/> PRC ID		<input type="checkbox"/> COMELEC ID		<input type="checkbox"/> LTO Driver's License		Other Government-issued IDs with signature & photo		<input type="checkbox"/> _____		<input type="checkbox"/> _____
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10.	• <b>2X2 picture</b> of Member and <b>photocopy of Death Certificate</b>																								
11.	• <b>2X2 picture of each legal beneficiary / claimant</b> (18 years old and above)																								
12.	• <b>Legal Beneficiary ID</b> of each legal beneficiary																								
	• Original PSO-Certified <b>Birth/Marriage Certificate</b> with OR (in case of discrepancy in name, birth date, birth place or info. on marriage)																								
	• Original signed & Notarized <b>Affidavit of Discrepancy</b> (for other discrepancies).																								
	• Original or Authenticated Copy of <b>Amendment to the Retirement Order or Corrected S.O.S.</b> (as may be needed).																								
	• <b>Authorization to Deposit</b> (if check is to be deposited)																								
	• Others:																								

**Photocopied documents must be authenticated by an authorized signatory of issuing AFP unit.**