



Republic of the Philippines  
Department of Finance  
**INSURANCE COMMISSION**  
1071 United Nations Avenue  
Manila



<b>Circular Letter (CL) No.:</b>	<b>2021-29</b>
<b>Date:</b>	<b>13 April 2021</b>
<b>Supersedes:</b>	<b>CL No. 2020-38 dated 09 April 2020 CL No. 2020-59 dated 14 May 2020 CL No. 2020-20 dated 23 March 2020</b>

## CIRCULAR LETTER

**TO : ALL PRE-NEED COMPANIES AUTHORIZED TO DO  
BUSINESS IN THE PHILIPPINES**

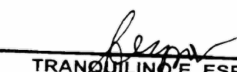
**SUBJECT : GUIDELINES ON THE ELECTRONIC SUBMISSION OF THE  
2020 ANNUAL STATEMENTS**

**WHEREAS**, Sections 42 and 43 of Republic Act (RA) No. 9829, otherwise known as the "Pre-Need Code," directs all pre-need companies authorized to do business in the Philippines to submit (a) Annual Audited Financial Statements (AFS) signed and sworn to by its chief executive officer, chief finance officer and external auditors, within one hundred twenty (120) days after the calendar or fiscal year, and (b) Annual Statement (AS) of its trust fund for each type of plan, in a form prescribed by the Insurance Commission (IC or the "Commission") and shall include details as to all income, disbursements, assets and liability items of and associated with the said trust fund accounts;

**WHEREAS**, the IC issued Circular Letter (CL) No. 2014-15 dated 15 May 2014 entitled "Fees and Charges" ("Circular on Fees and Charges"), which likewise imposes penalties for the delay of the submission of the reportorial requirements as expressly enumerated in Item No. VII, paragraphs A, B and D;

**WHEREAS**, IC CL No. 2020-59 dated 14 May 2020 directs the above-mentioned companies to submit their AS, AFS and attachments through electronic means.

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

Notwithstanding the submission of AS, AFS and attachments, the IC may require the company to submit the original hard copy of the electronically submitted documents for examination;

**WHEREAS**, in consideration of the Enhanced Community Quarantine (ECQ) imposed in the National Capital Region+, the Commission takes cognizance of the fact that the continued implementation of the ECQ poses specific challenges on the business operation and preparation of the regulatory requirements;

**NOW, THEREFORE**, in view of all the foregoing and pursuant to the Insurance Commissioner's power under Section 6 of RA No. 9829, the following guidelines are hereby promulgated:

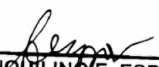
**SECTION 1. ANNUAL STATEMENTS (AS) OF THE PRE-NEED COMPANY AND AS OF TRUST FUND.**

- A. Separate AS showing the financial condition of the pre-need company and AS of the Trust Fund **for each type of plan** shall be submitted in soft copy following the prescribed format:
  - i. AS shall follow the pro-forma template, as seen in **Annex "A-1" and "A-2"**;
  - ii. The exact formats, columnar headings and footnote instruction found in every page of the attached pro-forma AS shall be **strictly observed**; and
  - iii. The Investments in Trust Fund, Pre-Need Reserve and Planholders' Benefit Payable accounts should be broken down into Old (SEC) and New (IC) Basket per types of plan in accordance with CL No. 2021-013, as shown in the updated schedule in **Annex "A-1."**
- B. Scanned copy of the notarized sworn statement duly signed by the President, Vice President, Actuary, Treasurer and Chief Accountant with attached documentary stamp should be attached; and
- C. The submitted AS shall include supporting documents necessary to authenticate the contents of the AS, as seen in **Annex "B."**

Any AS not in accordance with the prescribed format, with missing data/information, and incomplete attachments shall not be accepted.

The above enumerations do not prejudice the power of the Commission under Section 6 (c) of the Pre-Need Code of the Philippines to require other relevant information in the regulation, supervision and monitoring of the operations and management of pre-need companies to ensure compliance with the Pre-Need Code, as well as existing laws, rules, regulations and procedures.

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission



## SECTION 2. ONLINE SUBMISSION

All AS and corresponding attachments referred in this CL as **Annex "B"** shall be uploaded through the IC Online Uploading Portal via <https://onuploading.insurance.gov.ph/templates/login> only.

The documents in **Annex "B"** shall be arranged numerically according to the item numbers.

Uploaded documents shall be encrypted and the checksum of each file/folder shall be certified and uploaded in the above portal to ensure the data integrity of the uploaded documents.

## SECTION 3. DEADLINE OF ONLINE SUBMISSION OF THE AS

The AS and corresponding attachments of the above-mentioned companies shall be submitted on or before **30 April 2021, 4:00 PM**. Submissions made **until 31 May 2021, 4:00 PM** may be accepted without the imposition of penalty for delayed submission.

## SECTION 4. REVIEW AND APPROVAL

The submission shall be considered official once an e-mail from the company's authorized representative, stating that the AS and corresponding attachments are completely uploaded, is received by the IC Examiner-in-Charge (EIC), copy furnished the Division Manager and Supervisors.

The EIC will evaluate the uploaded documents and if found complete, the EIC will release an email, with the attached Order of Payment (OP) notifying the company's authorized representative to proceed with the payment of the filing fee and penalty (if any).

If the uploaded AS and its attachments are found to be incomplete, the same shall not be accepted, and the EIC will notify the company's authorized representative regarding the lacking items/documents/attachments via e-mail.

## SECTION 4. PAYMENT INSTRUCTIONS

Payment of the filing fee and penalty (if any) shall be made within the date indicated in the OP, in any of the following manner:

Mode of Payment	Where to Pay	Cut-Off Time
Cash/Check	Cashier Section, 2 <sup>nd</sup> Floor, IC Head Office, 1071 United Nations Avenue, Manila	2:00 pm
Online Deposit	Through the Link.BizPortal using the following link:	4:00 pm

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Administrative Division  
Insurance Commission

	<ol style="list-style-type: none"> <li>1. <a href="https://www.lbp-eservices.com/egps/portal/index.jsp">https://www.lbp-eservices.com/egps/portal/index.jsp</a></li> <li>2. <a href="https://epaymentportal.landbank.com/pay1.php?code=OW1NMEdmdm1UbHE1OHk5ZXlqZXBTLzJtOEFpS1IPUmVqdkdEVTIncVFraz0">https://epaymentportal.landbank.com/pay1.php?code=OW1NMEdmdm1UbHE1OHk5ZXlqZXBTLzJtOEFpS1IPUmVqdkdEVTIncVFraz0</a></li> </ol> <p><b>User Guide for Expanded Transaction Types is available at the IC Website via this link;</b></p> <p><a href="https://www.insurance.gov.ph/wp-content/uploads/2020/08/ePayment-System-User-Guide-Version-July-2020-FINAL.pdf">https://www.insurance.gov.ph/wp-content/uploads/2020/08/ePayment-System-User-Guide-Version-July-2020-FINAL.pdf</a></p>	
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The OP shall be valid until the next business day from the date indicated in the OP.

If mode of payment is done via cash/check, the company representative shall proceed to the Pre-Need Division to provide a copy of the IC Cashier-issued **Official Receipt** to validate the completion of filing.

If mode of payment is done via online deposit, the company representative shall send a screen-captured image of the Landbank-generated **Transaction or Acknowledgement Receipt** to the EIC via e-mail to validate the completion of filing.

None or late payment of the filing fee and penalty (if any) after the validity of the OP shall constitute an interest of 12% per annum until the same is fully paid.

## **SECTION 5. ACCESS OF THE AUTHORIZED REPRESENTATIVE TO THE ONLINE UPLOADING PORTAL**

The Online Uploading Portal shall be opened for uploading immediately upon effectivity of this CL and shall be closed at 4:00 pm of 30 April 2021.

Submission of the AS and its attachments **AFTER** 30 April 2021 shall only be allowed in the said portal beginning **03 May 2021 from 9:00 am to 4:00 pm every working day.**

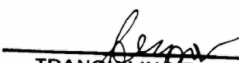
## **SECTION 6. SEPARABILITY CLAUSE**

If any provision of this Circular shall be held unconstitutional or invalid, the other provisions not otherwise affected shall remain in full force and effect.

## **SECTION 7. REPEALING CLAUSE**

All circulars, rules and regulations or parts thereof, which are inconsistent with the provisions of this Circular, are deemed repealed, superseded or modified accordingly.

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 IC Supervising Administrative Officer  
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## SECTION 8. EFFECTIVITY CLAUSE

This Circular shall take effect immediately.

  
**DENNIS B. FUNA**  
Insurance Commissioner

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**TRANQUILINO E. ESPEJON**  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission





**ANNUAL STATEMENT**

**OF**

**(NAME OF PRE-NEED COMPANY)**

*(Company Address)*

Submitted to the

**INSURANCE COMMISSION**

Manila, Philippines

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**TRANQUILINO E. ESPEJON**  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

For the Year Ended  
**DECEMBER 31, 20XX**



ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of

(                     Name of Pre-need Company                     )

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6	5	Summary of Monthly Sales
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37 APPENDIX: Summary of Invested Assets

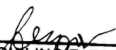
38 CERTIFICATION, NOTARIZED AND SEALED

Date of Filing: \_\_\_\_\_

Company Representative/Contact No.: \_\_\_\_\_

IC Representative/Examiner \_\_\_\_\_

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License Number _____	Date of Issue _____
Line of Business _____	
SEC Registration Number _____	Date of Issue _____
Date of Incorporation _____	Commenced Business on _____
Tax Identification Number _____	Registered Trade Name _____
Home Office Address _____	
Telephone Number _____	FAX Number _____
Email Address _____	Website _____

## MEMBERS OF THE BOARD, OFFICERS AND EMPLOYEES

[illegible]



**ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of**

**Annex A to Company Profile**

Provinces by Region	Number Of								
	Branches			Extension Office	Service Office	Satellite Office	Salaried Officers	Salaried Employees	Pre-Need Sales Counselors
	Domestic	Foreign	Total						
NCR	-	-	-	-	-	-	-	-	-
1. Manila			-						
2. Mandaluyong									
3. Marikina			-						
4. Pasig			-						
5. San Juan			-						
6. Quezon City			-						
7. Caloocan City			-						
8. Malabon			-						
9. Navotas			-						
10. Valenzuela			-						
11. Las Pinas			-						
12. Makati			-						
13. Muntinlupa			-						
14. Pasay City			-						
15. Taguig City			-						
16. Pateros			-						
17. Parañaque			-						
CAR	-	-	-	-	-	-	-	-	-
1. Abra			-						
2. Apayao			-						
3. Benguet			-						
4. Baguio City			-						
5. Ifugao			-						
6. Kalinga			-						
7. Mountain Province			-						
Region I	-	-	-	-	-	-	-	-	-
1. Ilocos Norte									
2. Ilocos Sur			-						

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3. La Union			-								
4. Pangasinan			-								
5. Dagupan City			-								
<b>Region II</b>	-	-	-	-	-	-	-	-	-	-	-
1. Batanes			-								
2. Cagayan			-								
3. Isabela			-								
4. Nueva Vizcaya			-								
5. Quirino			-								
6. Santiago			-								
<b>Region III</b>	-	-	-	-	-	-	-	-	-	-	-
1. Aurora			-								
2. Bataan			-								
3. Bulacan			-								
4. Nueva Ecija			-								
5. Pampanga			-								
6. Angeles City			-								
7. Tarlac			-								
8. Zambales			-								
9. Olongapo City			-								
<b>Region IV - A</b>	-	-	-	-	-	-	-	-	-	-	-
1. Batangas			-								
2. Cavite			-								
3. Laguna			-								
4. Quezon			-								
5. Lucena City			-								
6. Rizal			-								
<b>MIMAROPA</b>	-	-	-	-	-	-	-	-	-	-	-
1. Marinduque			-								
2. Occidental Mindoro			-								
3. Oriental Mindoro			-								
4. Palawan			-								
5. Puerto Princesa City			-								
6. Romblon			-								
<b>Region V</b>	-	-	-	-	-	-	-	-	-	-	-
1. Albay			-								
2. Camarines Norte			-								

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3. Camarines Sur			-								
4. Catanduanes			-								
5. Masbate			-								
6. Naga City											
7. Sorsogon			-								
Region VI	-	-	-	-	-	-	-	-	-	-	-
1. Aklan			-								
2. Antique			-								
3. Capiz			-								
4. Negros Occidental			-								
5. Bacolod City			-								
6. Guimaras			-								
7. Iloilo			-								
8. Iloilo City			-								
Region VII	-	-	-	-	-	-	-	-	-	-	-
1. Bohol			-								
2. Cebu			-								
3. Cebu City			-								
4. Lapu-Lapu			-								
5. Mandaue City			-								
6. Negros Oriental			-								
7. Siquijor			-								
Region VIII	-	-	-	-	-	-	-	-	-	-	-
1. Biliran			-								
2. Eastern Samar			-								
3. Leyte			-								
4. Tacloban City			-								
5. Northern Samar			-								
6. Southern Leyte			-								
7. Samar (Western Samar)											
8. Ormoc City			-								
Region IX	-	-	-	-	-	-	-	-	-	-	-
1. Zamboanga del Norte			-								
2. Zamboanga del Sur			-								
3. Zamboanga City			-								
4. Zamboanga Sibugay			-								
5. City of Isabela			-								

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<b>Region X</b>	-	-	-	-	-	-	-	-	-
1. Bukidnon			-						
2. Camiguin			-						
3. Lanao del Norte			-						
4. Iligan City			-						
5. Misamis Occidental			-						
6. Misamis Oriental			-						
7. Cagayan de Oro City			-						
<b>Region XI</b>	-	-	-	-	-	-	-	-	-
1. Davao del Norte			-						
2. Davao del Sur			-						
3. Davao City			-						
4. Davao Oriental			-						
5. Compostela Valley			-						
6. Davao Occidental			-						
<b>Region XII</b>	-	-	-	-	-	-	-	-	-
1. North Cotabato			-						
2. Sarangani			-						
3. South Cotabato			-						
4. General Santos City			-						
5. Sultan Kudarat			-						
<b>Region XIII</b>	-	-	-	-	-	-	-	-	-
1. Agusan del Norte			-						
2. Butuan City			-						
3. Agusan del Sur			-						
4. Surigao del Norte			-						
5. Surigao del Sur			-						
6. Dinagat Islands			-						
<b>BARM</b>	-	-	-	-	-	-	-	-	-
1. Basilan			-						
2. Lanao del Sur			-						
3. Maguindanao			-						
4. Sulu			-						
5. Tawi-tawi			-						
6. Cotabato City			-						
<b>GRAND TOTAL</b>	-	-	-	-	-	-	-	-	-

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Note and Instruction:  
1. Information provided in this table should tally with Company Info Tab

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Administrative Division  
Insurance Commission

Exhibit 1 - BALANCE SHEET

ASSETS		Current Year	Previous Year
1.	Investments in Trust Funds (Schedule 1)		
2.	Insurance Premium Fund (Schedule 2)		
3.	Corporate Assets: - Government Securities (Schedule 3-1)		
4.	-Cash on Hand and in Banks (Schedule3-2)		
5.	-Mutual Funds/UITF (Schedule 3-3)		
6.	-Short Term Investments (Schedule 3-4)		
7.	-Corporate Bonds (Schedule 3-5)		
8.	-Mortgage Loans (Schedule 3-6)		
9.	-Planholders' Loans (Schedule 3-7)		
10.	-Stocks (Schedule 3-8)		
11.	-Real Estate (Schedule 3-9)		
12.	-Other Investment (Schedule 3-10)		
13.	-Accrued Investment Income (Schedule 3-11)		
14.	-Accounts/Notes Receivable (Schedule 3-12)		
15.	-Property and Equipment (Schedule 3-13)		
16.	-Inventories (Schedule 3-14)		
17.	-Other Assets (Schedule 3-15)		
18.	Total Assets		
LIABILITIES			
19.	Pre-need Reserves (Exhibit 6- Seriatim List)		
20.	Insurance Premium Reserve ( Schedule 4)		
21.	Other Reserves (Schedule 5)		
22.	Planholders' Benefits Payable ( Schedule 6)		
23.	Planholders' Deposits (Schedule 7)		
24.	Counselors' Bond Reserves (Schedule 8)		
25.	Accounts/Notes Payable (Schedule 9)		
26.	Taxes Payabale (Schedule 10)		
27.	Accrued Expenses (Schedule 11)		
28.	Other Liabilities (Schedule 12)		
29.	Total Liabilities		
STOCKHOLDERS' EQUITY			
30.	Paid-up Capital Stock (Schedule 12)		
31.	Additional Paid-in Capital		
32.	Deposit for Future Subscription		
33.	Special Surplus Funds:		
34.	Fluctuation/Revaluation Reserve - Trust Funds		
35.	Fluctuation/Revaluation Reserve -Corporate Assets		
36.	Retained Earnings - Trust Fund		
37.	Retained Earnings - Corporate Assets		
38.	Total Stockholders' Equity		
39.	Total Liabilities & Stockholders' Equity		

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

## ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

## Exhibit 2- INCOME STATEMENT

(Accrual Basis)

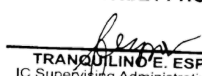
Premiums	P	_____	a
Increase(Decrease) in Pre-Need Reserves		_____	b
Increase(Decrease) in Insurance Premium Reserves		_____	c
Increase(Decrease) in Other Pre-Need Reserves		_____	d
*Other Direct Income (ex. Processing fees, surcharges, etc.)		_____	e
<b>Total Direct Income (a + b + c + d + e)</b>		_____	f
Less: Benefit Payments (Surrenders, maturities, lapsed, terminated, etc.)	P	_____	g.1
Commissions Expenses		_____	g.2
*Other Direct Expenses (insurance , discount, overrides, bonus, etc.		_____	g.3
<b>Total Direct Expenses (g.1 + g.2 + g.3)</b>		_____	g
Gain/(Loss) (f - g)		_____	h
Plus: Interest/Income Earned from the following Trust Fund/Placements/Investments.			
(Gross of Final Taxes)			
Government Securities		_____	i.1
Cash on hand and in Bank		_____	i.2
Mutual Funds/UITF		_____	i.3
Short-term Investments		_____	i.4
Corporate Bonds		_____	i.5
Mortgage Loans		_____	i.6
Planholders" Loan		_____	i.7
Stocks		_____	i.8
Real Este		_____	i.9
Other Investments (specify)		_____	i.10
<b>Total Gain/(Loss) &amp; Interest Earned (h + i)</b>		_____	j
Other Income/Expense items:			
Depreciation - Building		_____	k.1
Investment Expenses		_____	k.2
*Other Income/Other Expenses (ex. Forex gain/(loss), etc.)		_____	k.3
<b>Sub-Total (j + k)</b>		_____	l
Less: Taxes other than Income tax			
Taxes on Real Estate		_____	m.1
Documentary Stamp Tax		_____	m.2
Corporate Residence Certificate		_____	m.3
Assessment, Licenses & Fees		_____	m.4
VAT & Fringe Benefit Tax		_____	m.5
Final Taxes		_____	m.6
<b>Other General Expenses</b>			
Salaries & Wages		_____	n.1
Allowance to Officers		_____	n.2
Allowance to Employees		_____	n.3
Pension, Retirement, & Other			
similar benefits (SSS, Medicare, etc.)		_____	n.4
Rent, Light & Water		_____	n.5
Other General Expenses		_____	n.6
<b>Sub-Total (taxes &amp; general expenses) (m + n)</b>		_____	o
<b>Net Income/(Loss) before Income Tax</b>		_____	p
Less: Income Tax		_____	q
<b>Net Income/(Loss) for the year (p - q)</b>		_____	r

Note: Capital Gains/Losses) on \_\_\_\_\_ amounting to P \_\_\_\_\_ is excluded.

\*Please specify on separated sheet

/stats

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission



ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

EXHIBIT 3 - SUMMARY OF MONTHLY DEPOSITS TO THE TRUST FUND (Per Plan)

Month (1)	Amount Collected (2)	Amount of Required Deposit (3)	Amount of Actual Deposit (4)	Remarks (5)
Memorial Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Education Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Pension Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
GRAND TOTAL				

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____							
EXHIBIT 4 - SUMMARY OF MONTHLY WITHDRAWALS FROM THE TRUST FUNDS (Per Plan)							
Month (1)	Total Amount of Benefits Paid (2)	Total Amount of Withdrawal (3)	Breakdown / Purpose of Withdrawal				Description for "Others" (8)
			Planholders' Benefits (4)	Trustee's Fees (5)	Taxes (6)	Others (7)	
<b>Memorial Plan:</b>							
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
<b>Education Plan:</b>							
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
<b>Pension Plan:</b>							
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
<b>GRAND TOTAL</b>							

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ANNUAL STATEMENT For the Year Ended December 31, 20\_\_ of \_\_\_\_\_

Exhibit 5 - SUMMARY OF MONTHLY SALES FOR THE YEAR

Plan Type  (1)	Registration of Plans/Contracts		Amount Sold  (4)	Balance of Unsold Plans/Contracts  (5)
	Date Approved  (2)	Amount Approved  (3)		
Memorial Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Sub-total				
Education Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Sub-total				
Pension Plan:				
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Sub-total				
GRAND TOTAL				

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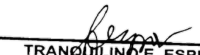
  
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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

Exhibit 6 - SERIATIM LIST OF IN-FORCE POLICIES

Contract Number	Planholders Name	Birth Date	Inception Date	Plan Type	Maturity Value	Maturity Date	Status	Contract Price	Payment Mode	Total Installments Made	INSURANCE		BENEFITS				Reserves as of 12/31/20__
											Total Insurance Premium (12)	Total Insurance Premium Paid (13)	Amount of Benefits Paid (14)	Balance (15)	Last Availment Date (16)	Last Amount Availed (17)	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
MEMORIAL PLAN:																	
A. Old Basket (SEC):																	
1																	
2																	
3																	
4																	
5																	
Sub-total																	
B. New Basket (IC):																	
1																	
2																	
3																	
4																	
5																	
Sub-total																	
Total																	
EDUCATION PLAN:																	
A. Old Basket (SEC):																	
1																	
2																	
3																	
4																	
5																	
Sub-total																	
B. New Basket (IC):																	
1																	
2																	
3																	
4																	
5																	
Sub-total																	
Total																	
EDUCATION PLAN:																	
A. Old Basket (SEC):																	
1																	
2																	
3																	
4																	
5																	
Sub-total																	
B. New Basket (IC):																	
1																	
2																	
3																	
Sub-total																	
Total																	
Grand Total																	
Note: For the supporting details, provide soft copy indicating all the required information of Exhibit 6.																	

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

EXHIBIT 7 - LIST OF AVAILING PLANS FOR THE SUCCEEDING YEAR

Planholders' Name  (1)	Contract / Policy  Number  (2)	Plan  Type  (3)	Term Of Contract		Benefit  Payable  (6)
			Issue Date	Maturity Date	
			(4)	(5)	
Memorial Plan:					
Sub-total					
Education Plan:					
Sub-total					
Pension Plan:					
Sub-total					
GRAND TOTAL					

Note: For the supporting details, provide soft copy indicating all the required information of Exhibit 7.

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

Exhibit 8 - CLAIMS / BENEFITS FILED

Date of Claim (1)	Contract Number (2)	Planholders' Name (3)	Inception Date (4)	Plan Type (5)	Maturity Value (6)	Maturity Date (7)	Contract Price (8)	Total Installments Made (9)	Total Insurance Premium Paid (10)	Amount of Benefits Paid (11)	Date Paid (12)	Status of Claim (13)
<b>Memorial Plan:</b>												
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
<b>Sub-total</b>												
<b>Education Plan:</b>												
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
<b>Sub-total</b>												
<b>Pension Plan:</b>												
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
<b>Sub-total</b>												
<b>Grand Total</b>												

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 1 - INVESTMENTS IN TRUST FUNDS

Description	VALUE OF INVESTMENTS													INTEREST / DIVIDEND / RENTAL INCOME			
	PLAN													Collected	Accrued	Accrued	Earned
	MEMORIAL				PENSION				EDUCATION				GRAND TOTAL	During the Year	Previous Year	Current Year	During the Year
	Old Basket (SEC)	New Basket (IC)	Total	% to Total Equity	Old Basket (SEC)	New Basket (IC)	Total	% to Total Equity	Old Basket (SEC)	New Basket (IC)	Total	% to Total Equity	GRAND TOTAL				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
urities	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
Time Deposits	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
TF	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
Investments	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
ns	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
ns	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
ent Income	Exh 1 (AS-TF)		-	#DIV/0!			-	#DIV/0!			-		-				
TOTAL ASSETS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
es	Exh 1 (AS-TF)												-				
	Exh 1 (AS-TF)												-				
	Exh 1 (AS-TF)												-				
TOTAL LIABILITIES		-	-	-	-	-	-	-	-	-	-	-	-				
TOTAL EQUITY		-	-	-	-	-	-	-	-	-	-	-	-				

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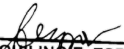
  
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**ANNUAL STATEMENT For the Year Ended December 31, 2013 of \_\_\_\_\_**

**SCHEDULE 2 - INSURANCE PREMIUM FUND (IPF)**

Description*  (1)	VALUE OF INVESTMENTS				INTEREST / DIVIDEND / RENTAL INCOME			
	PLAN				Collected During the Year (6)	Accrued Previous Year (7)	Accrued Current Year (8)	Earned During the Year (9)
	MEMORIAL (2)	PENSION (3)	EDUCATION (4)	TOTAL (5)				
Government Securities								
Cash in Savings/Time Deposits								
Mutual Funds/UITF								
Short Term Investments								
Corporate Bonds								
Mortgage Loans								
Planholders' Loans								
Stocks								
Real Estate								
Other Investments								
Accrued Investment Income								
<b>TOTAL INVESTMENTS</b>								

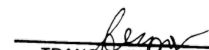
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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SECURITY		DATE			INITIAL ACQUISITION/BOOKING VALUE			PRICE				Unrealized Gain (Loss)	INTEREST					
Description	Serial No.	Acquired	Issued	Maturity	Face Value	Underwriting Discount/Premium	Acquisition Cost	At Acquisition Date	At Closing/Balance Sheet Date	Book Value	Market Value		Annual Coupon Rate	How Paid*	Collected During the Year	Accrued Previous Year	Accrued Current Year	Earned During the Year
1	2	3	4	5	6	7	8	9	10	11	12	13= (12-11)	14	15	16	17	18	19 = (16+17-18)
DOMESTIC ISSUES:																		
FXTN:																		
1																		
2																		
3																		
4																		
5																		
TREASURY BILLS																		
1																		
2																		
3																		
Sub-total																		
FOREIGN ISSUES:																		
1																		
2																		
3																		
4																		
5																		
Sub-total																		
TOTALS																		
*Indicate whether annually, semi-monthly, quarterly or monthly.																		

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-2 Corporate Assets - Cash on hand and in banks

Description	Account/ Certificate Number	DATE		Annual Rate/ Interest	Term/ Period	BALANCE		INTEREST			
		Acquistion/ Placement	Maturity			At Acquisition/ Placement Date	At Closing/ Balance Sheet Date	Collected	Accrued	Accrued	Earned
								During the Year	Previous Year	Current Year	During the Year
2	3	4	5	6	7	8	9	10	11	12	13
<b>Cash in Company's Office:</b>											
Petty Cash Fund											
Revolving Fund											
Commission Fund											
Sub-total											
<b>Cash in Bank:</b>											
<b>Current Accounts:</b>											
1											
2											
3											
Sub-total											
<b>Savings Accounts:</b>											
1											
2											
3											
Sub-total											
<b>Time Deposit Accounts:</b>											
1											
2											
3											
Sub-total											
<b>GRAND TOTAL</b>						-	-	-	-	-	-

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**ANNUAL STATEMENT for the Year Ended December 31, 2013 of \_\_\_\_\_**

**SCHEDULE 3-3 - Corporate Assets - MUTUAL FUNDS/ UITF**

Description	Account /Certificate Number	Acquisition Date	Number of Units/Shares Held	Net Asset Value per Unit/Share		Acquisition Cost	Market Value	Unrealized Gain (Loss)
				At Acquisition Date	At Closing/Balance Sheet Date			
1	2	3	4	5	6	7	8	9
<b>Mutual Funds</b>								
1								
2								
3								
4								
5								
Sub-total								
<b>Unit Investment Trust Funds</b>								
1								
2								
3								
4								
5								
Sub-total								
<b>Others</b>								
1								
2								
3								
4								
5								
Sub-total								
<b>GRAND TOTALS</b>								

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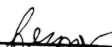
  
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SCHEDULE 3-4 - Corporate Assets - SHORT TERM INVESTMENTS

Investment Type/Description	Account/ Certificate Number	DATE		Annual Rate/Interest	Term/Period	BALANCE		INTEREST			
		Acquistion/ Placement	Maturity			At Acquisition/ Placement Date	At Closing/ Balance Sheet Date	Collected	Accrued	Accrued	Earned
								During the Year	Previous Year	Current Year	During the Year
1	2	1	3	2	4	3	5	4	6	5	7
1 Special Deposit Accounts (BSP)											
2											
3											
4											
5											
6											
7											
TOTAL											

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-5 Corporate Assets - CORPORATE BONDS


SECURITY	DATE	INITIAL ACQUISITION/BOOKING VALUE	PRICE	CURRENT/CLOSING VALUE		INTEREST
----------	------	-----------------------------------	-------	-----------------------	--	----------

[illegible]

**TOTALS**

\*Indicate whether annually, semi-monthly, quarterly or monthly.

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-6 Corporate Assets - MORTGAGE LOANS

Name and Address of Mortgagor (1)	Description of Property (TCT/CCT No.; Location; Area) (2)	Record of Mortgage: (Registry No.; Entry No.; City/Prov.; Amt of Notation) (3)	Market Value of Land Mortgaged (4)	Sound Value of Building (5)	Term of Loan		Amount of Original Loan (8)	PRINCIPAL				INTEREST				
					Date Given (6)	Date Due (7)		Amount Unpaid Dec.31 Prev Yr (9)	Loaned During the Year (10)	Paid During the Year (11)	Amount Unpaid Dec.31 Current Yr (12)	Annual Rate (13)	Collected During the Year (14)	Accrued Previous Year (15)	Accrued Current Year (16)	Earned During the Year (17)
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																
16																
17																
18																
19																
20																
TOTALS																

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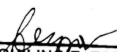
  
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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-7 Corporate Assets - Planholders' loans

Policyholder / Borrower (1)	Term of Loan		Contract Number (4)	Amount of Insurance (5)	Amount of Original Loan (6)	PRINCIPAL				INTEREST				
	Date of Loan (2)	Date of Maturity (3)				Amount Unpaid Dec.31 Prev Yr (7)	Loaned During the Year (8)	Paid During the Year (9)	Amount Unpaid Dec.31 Current Yr (10)	Annual Rate (11)	Collected During the Year (12)	Accrued Previous Year (13)	Accrued Current Year (14)	Earned During the Year (15)
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														
21														
22														
23														
24														
25														
TOTAL														

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**SCHEDULE 3-8 Corporate Assets - STOCKS**

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Page 19\_Sch3-8\_Stocks\_PN

ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-9 Corporate Assets - REAL ESTATE

TCT/CCT Number.; City/Province (1)	Area & Description of Lot / Building (2)	Name of Vendor (3)	Date Acquired (4)	Estimated Life of Building (5)	Actual Cost (6)	Accumulated Depreciation Building (7)	Net Book Value (8)	Market Value per Appraisal (9)	RENTAL INCOME				Encumbrance (if Any) (14)																	
									Collected During the Year (10)	Accrued Previous Year (11)	Accrued Current Year (12)	Earned During the Year (13)																		
<b>Occupied by the Company:</b>																														
Lot																														
Building																														
Sub-total																														
<b>Investment Properties</b>																														
Lot																														
Building																														
Sub-total																														
GRAND TOTALS																														

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____										
SCHEDULE 3-10 Corporate Assets - OTHER INVESTMENTS										
Description  (1)	Account Number  (2)	Date of Placement  (3)	Date of Maturity  (4)	Number of Shares / Units  (5)	Acquisition cost  (6)	Market Value  (7)	INTEREST			
							Collected During the Year (8)	Accrued Previous Year (9)	Accrued Current Year (9)	Earned During the Year (10)
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
TOTAL										

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____						
SCHEDULE 3-11 Corporate Assets - ACCRUED INVESTMENT INCOME						
Kind of Investment  (1)	Collected During the Year (2)	Accrued Investment Income		Unearned Investment Income		Earned During the Year (2-3+4+5-6) (7)
		Current Year (5)	Previous Year (6)	Current Year (3)	Previous Year (4)	
1 Interest on Government Securities						
2 Income on Corporate Bonds						
3 Dividends on Stocks						
4 Income on Real Estate						
5 Interest on Mortgage Loans						
6 Interest on Planholders' Loans						
7 Income on Short Term Investments						
8 Income on Other Investments						
9 Interest on Bank Deposits						
Others:						
10						
11						
12						
<b>TOTAL</b>						

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE Corporate Assets 3-12 ACCOUNTS/ NOTES RECEIVABLE

Name / Address of Debtor or Maker of Note*	Date Granted / Issued	Original Amount	Date of Last Payment	Amount Paid During the Year	Balance as of 12-31-PY	Balance as of 12-31-CY	Remarks <i>(Description: Nature, and Security, if any)</i>
(1)	(2)	(3)	(4)	(5)	(7)	(8)	(8)
<b>Accounts Receivable:</b>							
Secured:							
1							
2							
3							
Unsecured:							
1 Insurance Claims Receivable							
2							
3							
Sub-total							
<b>Notes Receivable:</b>							
Secured:							
1							
2							
3							
Unsecured:							
1							
2							
3							
Sub-total							
<b>Other Receivable:*</b>							
1 Advances to Employees							
2 Advances to Agents							
3 Advances to DOSRI							
Sub-total							
GRAND TOTALS							

\*To be Itemized in detail.

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**SCHEDULE 3-13 Corporate Assets - PROPERTY and EQUIPMENT**

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE Corporate assets 3-14 Corporate Assets - INVENTORIES				
Particulars  (1)	Nature of Account  (2)	COST Previous Year (3)   Current Year (4)		Remarks  (5)
1 Caskets				
2 Urns				
3 Memorial Lots				
4				
5				
6				
7				
TOTAL				
*To be Itemized in detail.				

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ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 3-15 Corporate Assets - OTHER ASSETS

Particulars (1)	Nature of Account (2)	Balance Previous Year (3)	Balance of Current Year (4)	Remarks (5)
1 Prepaid Expenses				
2 Prepayments				
3 Deposits				
4 Leasehold				
5 Leashold Improvements				
6				
7				
8				
9				
10				
	TOTAL			
*To be Itemized in detail.				

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____		
SCHEDULE 4 - INSURANCE PREMIUM RESERVE		
Plan  (1)	Balance of Previous Year  (2)	Balance Current Year  (3)
1 Memorial		
2 Pension		
3 Education		
TOTAL		

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____		
SCHEDULE 5 - OTHER RESERVES		
Plan (1)	Balance of Previous Year (2)	Balance Current Year (3)
1		
2		
3		
TOTAL		

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ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____					
SCHEDULE 6 - PLANHOLDERS' BENEFITS PAYABLE					
Name of Planholder (1)	Contract Number (2)	Nature of Account (3)	Balance Previous Year (4)	Balance Current Year (5)	Remarks (6)
<b>MEMORIAL PLAN:</b>					
<b>A. Old Basket (SEC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
<b>B. New Basket (IC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
Total			-	-	
<b>EDUCATION PLAN:</b>					
<b>A. Old Basket (SEC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
<b>B. New Basket (IC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
Total			-	-	
<b>PENSION PLAN:</b>					
<b>A. Old Basket (SEC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
<b>B. New Basket (IC)</b>					
1					
2					
3					
4					
5					
Sub-total			-	-	
Total			-	-	
Grand Total			-	-	

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TRANQUILINA E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 7 - PLANHOLDERS' DEPOSITS

Name of Planholder	Contract Number	Balance of Previous Year	Received During the Year	Refunded During the Year	Balance Current Year 3+4-5
(1)	(2)	(3)	(4)	(5)	(6)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
GRAND TOTAL					

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission



ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE 8 - COUNSELORS' BOND RESERVE				
Name of Sales Counselor	Balance of Previous Year	Received During the Year	Refunded During the Year	Balance Current Year 2+3-4
(1)	(2)	(3)	(4)	(5)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
GRAND TOTAL				

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE 9 - ACCOUNTS/NOTES PAYABLE				
Name of Creditor*	Nature of Account	Balance Previous Year	Balance of Current Year	Remarks
(1)	(2)	(3)	(4)	(5)
<b>Notes Payable</b>				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Sub-total				
<b>Accounts Payable</b>				
1				
2				
3				
4				
5				
Sub-total				
<b>GRAND TOTAL</b>				
*To be Itemized in detail.				

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE 10 - TAXES PAYABLE				
Particulars (1)	Nature of Account (2)	Balance Previous Year (3)	Balance of Current Year (4)	Remarks (5)
1 Value-Added Taxes				
2 Documentary Stamp Taxes				
3 Income Taxes				
4 Withholding Taxes				
5				
6				
7				
TOTAL				
*To be Itemized in detail.				

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE 11- ACCRUED EXPENSES				
Name of Creditor *	Nature / Description	Balance	Balance of	Remarks
(1)	of Account	Previous Year	Current Year	
(2)		(3)	(4)	(5)
1	Accrued Insurance			
2	Accrued Salaries			
3				
4				
5				
6				
7				
TOTAL				
*To be Itemized in detail.				

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20__ of _____				
SCHEDULE 12 - OTHER LIABILITIES				
Name of Creditor* (1)	Nature / Description of Account (2)	Balance Previous Year (3)	Balance of Current Year (4)	Remarks (5)
1				
2				
3				
4				
5				
6				
7				
TOTAL				
*To be Itemized in detail.				

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

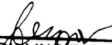
ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SCHEDULE 13 - STOCKHOLDERS' EQUITY

Authorized Capital Stock: Number of Shares - \_\_\_\_\_; Amount - P \_\_\_\_\_

Name of Stockholder (1)	Citizenship (2)	Number of Shares (3)	Par Value per Share (4)	Subscribed Capital (5)	Percentage of Ownership (6)	Subscription Receivable (7)	Paid-up Capital Stock		Additional Paid-in Capital (10)	Deposit for Future Subscription (11)	Dividends Paid During the Year (12)	Dividends Payable Current Year (13)
							Common (8)	Preferred (9)				
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
Total												

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

SUMMARY OF INVESTED ASSETS

	PENSION	LIFE/MEMORIAL	EDUCATIONAL	TOTAL TRUST FUND	INSURANCE PREMIUM FUND	CORPORATE ASSETS	GRAND TOTAL
<b>1 . BONDS</b>							
<b>A. GOVERNMENT</b>							
A.1 FX Rate T- Notes							
A.2 Floating Rate T-Notes							
A.3 Retail T- Bonds							
A.4 ST Denom Bonds (ERAP)							
A.5 Agrarian Reform Bonds/Landbank							
A.6 Philippine Issued Eurobonds (P, \$)							
<b>B. PRIVATE BONDS</b>							
<b>C. FOREIGN BONDS</b>							
<b>2 . STOCKS</b>							
<b>3 . REAL ESTATE</b>							
<b>4 . PURCHASE MONEY MORTGAGES</b>							
<b>5 . MORTGAGE LOANS ON REAL ESTATE</b>							
<b>6 . COLLATERAL LOANS</b>							
<b>7 . GUARANTEED LOANS</b>							
<b>8 . OTHER LOANS</b>							
8.1 Car Loans							
8.2 Chattel							
8.3 Other Loans							
<b>9 . SHORT-TERM INVESTMENTS</b>							
9.1 Short-Term Government Bonds							
9.1.1 Treasury Bills							
9.2 Commercial Papers							
9.3 Promissory Note							
9.4 Fixed Income							
9.5 Repurchase Agreement							
<b>10 . OTHER INVESTMENTS</b>							
10.1 Contract Receivables							
10.2 Proprietary Shares							
10.3 Preferred Shares							
10.4 Long-Term Commercial Papers							
10.5 Real Estate Investment Trust (REIT)							
10.6 Tier 2 Notes							
10.7 Service Assets							
<b>11 . FIXED DEPOSITS</b>							
11.1 Super/Special Savings							
11.2 Time Deposits							
<b>TOTAL INVESTMENTS</b>							

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**TRANQUILINO E. ESPEJON**  
 IC Supervising Administrative Officer  
 Administrative Division  
 Insurance Commission

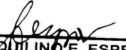


## ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

## SUMMARY OF INVESTED ASSETS

	PENSION	LIFE/MEMORIAL	EDUCATIONAL	TOTAL TRUST FUND	INSURANCE PREMIUM FUND	CORPORATE ASSETS	GRAND TOTAL
<b>1 . BONDS</b>							
<b>A. GOVERNMENT</b>							
A.1 FX Rate T- Notes							
A.2 Floating Rate T-Notes							
A.3 Retail T- Bonds							
A.4 ST Denom Bonds (ERAP)							
A.5 Agrarian Reform Bonds/Landbank							
A.6 Philippine Issued Eurobonds (P, \$)							
<b>B. PRIVATE BONDS</b>							
<b>C. FOREIGN BONDS</b>							
<b>2 . STOCKS</b>							
<b>3 . REAL ESTATE</b>							
<b>4 . PURCHASE MONEY MORTGAGES</b>							
<b>5 . MORTGAGE LOANS ON REAL ESTATE</b>							
<b>6 . COLLATERAL LOANS</b>							
<b>7 . GUARANTEED LOANS</b>							
<b>8 . OTHER LOANS</b>							
8.1 Car Loans							
8.2 Chattel							
8.3 Other Loans							
<b>9 . SHORT-TERM INVESTMENTS</b>							
9.1 Short-Term Government Bonds							
9.1.1 Treasury Bills							
9.2 Commercial Papers							
9.3 Promissory Note							
9.4 Fixed Income							
9.5 Repurchase Agreement							
<b>10 . OTHER INVESTMENTS</b>							
10.1 Contract Receivables							
10.2 Proprietary Shares							
10.3 Preferred Shares							
10.4 Long-Term Commercial Papers							
10.5 Real Estate Investment Trust (REIT)							
10.6 Tier 2 Notes							
10.7 Service Assets							
<b>11 . FIXED DEPOSITS</b>							
11.1 Super/Special Savings							
11.2 Time Deposits							
<b>TOTAL INVESTMENTS</b>							

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT for the Year Ended December 31, 20\_\_ of

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ } S.S.

\_\_\_\_\_, President; \_\_\_\_\_, Vice President;  
\_\_\_\_\_, Actuary; \_\_\_\_\_, Treasurer;  
and \_\_\_\_\_, Chief Accountant of the company, being  
duly sworn, each for himself deposes and says that they are the herein described officers of the said company,  
and that on the 31st day of December last, all the herein described assets were the absolute properties of  
the said company, free and clear from any liens or claims thereon, except as therein stated, and that the  
foregoing statement, with the schedules and explanations therein contained, annexed or referred to are a full  
and correct statement of all the Assets, Liabilities, Income and Expenses and of the condition and affairs of  
the said company on the said thirty-first day of December last, and for the year ended on that date, according  
to the best of their information, knowledge and belief, respectively.

\_\_\_\_\_, President  
\_\_\_\_\_, Vice President  
\_\_\_\_\_, Actuary  
\_\_\_\_\_, Treasurer  
\_\_\_\_\_, Chief Accountant

Affix  
Documentary  
Stamps

Corporate Residence Certificate No. \_\_\_\_\_  
Issued at \_\_\_\_\_  
on \_\_\_\_\_  
Additional Residence Certificate No. \_\_\_\_\_  
issued at \_\_\_\_\_  
on \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My commission expires on December 31, \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of

(  Name of Pre-need Company  )

(TYPE OF PLAN)

Table of Contents

Pages

1 COMPANY INFORMATION

EXHIBITS:

- 2 1 Balance Sheet
- 3 2 Income Statement
- 4 3 List of Trustees
- 5 4 Summary of Monthly Deposits to the Trust Fund - Per Trustee
- 6 5 Summary of Monthly Withdrawals from the Trust Fund - Per Trustee

SCHEDULES:

- 7 1 Government Securities
- 8 2 Cash on Hand and in Banks
- 9 3 Mutual Funds/UITF
- 10 4 Short Term Investments
- 11 5 Corporate Bonds
- 12 6 Mortgage Loans
- 13 7 Planholders' Loans
- 14 8 Stocks
- 15 9 Real Estate
- 16 10 Other Investment
- 17 11 Accrued Investment Income
- 18 12 Other Assets
- 19 13 Accrued Trust Fees
- 20 14 Accrued Taxes
- 21 15 Other Liabilities
- 22 16 Retained Earnings

23 CERTIFICATION, NOTARIZED AND SEALED

Date of Filing: \_\_\_\_\_

Company Representative: \_\_\_\_\_

Contact Nunmber: \_\_\_\_\_

IC Representative/Examiner: \_\_\_\_\_

Date Received: \_\_\_\_\_

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

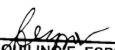


**ANNUAL STATEMENT  
OF  
TRUST FUND**

**(NAME OF PRE-NEED COMPANY)**  
*(Company Address)*

Submitted to the  
**INSURANCE COMMISSION**  
Manila, Philippines

For the Year Ended  
**DECEMBER 31, 20XX**

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**TRANSLINDA E. ESPEJON**  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

**(TYPE OF PLAN)**

**ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20 of**

(TYPE OF PLAN)

License Number _____	Date of Issue _____
SEC Registration Number _____	Date of Issue _____
Date of Incorporation _____	Commenced Business on _____
Tax Identification Number _____	
Home Office Address _____	
Telephone Number _____	FAX Number _____
Email Address _____	Website _____


  

**MEMBERS OF THE BOARD, OFFICERS AND EMPLOYEES**

Position	Name	Nationality	Terms of Office	
			From	To
Chairman	_____	_____	_____	_____
Vice-Chairman	_____	_____	_____	_____
Members	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Independent Directors:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
President	_____	_____	_____	_____
Vice-President	_____	_____	_____	_____
Secretary	_____	_____	_____	_____
Treasurer	_____	_____	_____	_____
General Manager	_____	_____	_____	_____
Actuary	_____	_____	_____	_____
Department Heads:	_____	_____	_____	_____
Underwriting	_____	_____	_____	_____
Sales	_____	_____	_____	_____
Investments	_____	_____	_____	_____
Administration	_____	_____	_____	_____
Claims	_____	_____	_____	_____
	_____	_____	_____	_____
Chief Accountant	_____	_____	_____	_____
Internal Auditor	_____	_____	_____	_____
External Auditor	_____	_____	_____	_____
Compliance Officers:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Trustees:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

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**TRANQUILINO E. ESPEJON**  
 IC Supervising Administrative Officer  
 Administrative Division  
 Insurance Commission

Number of Salaried Officers _____	Number of Salaried Employees _____
Number of Branches _____	Number of Sales Counselors _____
<b>Branch Office Address:</b>	<b>Name of Manager:</b>
_____	_____
_____	_____
_____	_____
_____	_____

ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20\_\_ of

(TYPE OF PLAN)

EXHIBIT 1 - BALANCE SHEET

ASSETS	Current Year	% to Total Equity	Previous Year	% to Total Equity
1 Government Securities (Schedule 1)				
2 Cash in Savings/Time Deposits (Schedule 2)				
3 Mutual Funds/UITF (Schedule 3)				
4 Short Term Investments (Schedule 4)				
5 Corporate Bonds (Schedule 5)				
6 Mortgage Loans (Schedule 6)				
7 Planholders' Loans (Schedule 7)				
8 Stocks (Schedule 8)				
9 Real Estate (Schedule 9)				
10 Other Investments (Schedule 10)				
11 Accrued Investment Income (Schedule 11)				
12 Other Assets (Schedule 12)				
13 Total Assets				
LIABILITIES				
14 Accrued Trust Fees (Schedule 13)				
15 Accrued Taxes (Schedule 14)				
16 Other Liabilities (Schedule 15)				
17 Total Liabilities				
FUND EQUITY				
18 Fund Balance (beginning)				
19 Additional Contribution (current year) (Exhibit 4)				
20 Withdrawals (current year) (Exhibit 5)				
21 Adjustments (prior periods) (Schedule 1-15)				
22 Fund Balance (ending)				
23 Retained Earnings (beginning)				
24 Net Income (Loss) - (current year) (Exhibit 2)				
25 Retained Earnings (end)				
26 Net Unrealized Income (Loss) (Schedule 1-10)				
27 Total Fund Equity				
28 Total Liabilities & Fund Equity				

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20\_\_ of

(TYPE OF PLAN)

EXHIBIT 2 - INCOME STATEMENT

INCOME	Current Year	Previous Year
1 Interest Income		
<i>Special Deposit Account</i>		
<i>Deposits in Bank</i>		
<i>Government Securities</i>		
<i>Other Securities and Debt Instruments</i>		
<i>Others (Specify)</i>		
2 Gain on Sale of Securities		
<i>Government Securities</i>		
<i>Stocks</i>		
<i>Preferred Shares</i>		
<i>Others (Specify)</i>		
3 Dividend Income		
<i>Preferred Shares</i>		
<i>Stocks</i>		
4 Other Income		
5 <b>Total Income before Expenses</b>		
EXPENSES		
6 Trust and Management Fee		
7 Other Expenses (Specify)		
8 <b>Total Expenses</b>		
NET INCOME BEFORE TAX		
9 Taxes (Specify)		
NET INCOME AFTER TAXES		
RETURN ON INVESTMENTS	%	%

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission



ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20\_\_ of

(TYPE OF PLAN)

EXHIBIT 3 - LIST OF TRUSTEES

	Name of Trustee (1)	Account Number (2)	Trust Fund Equity (3)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
TOTALS			

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20__ of				
(TYPE OF PLAN)				
EXHIBIT 4 - SUMMARY OF MONTHLY DEPOSITS TO THE TRUST FUND (Per Trustee)				
Name of Trustee Bank	Month (1)	Amount of Required Deposit (2)	Amount of Actual Deposit (3)	Remarks (4)
	January			
	February			
	March			
	April			
	May			
	June			
	July			
	August			
	September			
	October			
	November			
	December			
TOTALS				

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TRANQUILINA E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

EXHIBIT 5 - SUMMARY OF MONTHLY WITHDRAWALS FROM THE TRUST FUNDS (Per Trustee)

Month (2)	Total Amount of Withdrawal (3)	Breakdown / Purpose of Withdrawal				Description for "Others" (8)
		Planholders' Benefits (4)	Trustee's Fees (5)	Taxes (6)	Others (7)	
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
TOTALS						

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20__ of _____																			
(TYPE OF PLAN)																			
SCHEDULE 1- Government Securities																			
NAME OF TRUSTEE BANK	SECURITY		DATE			INITIAL ACQUISITION/BOOKING VALUE			PRICE				Unrealized Gain (Loss)	INTEREST					
	Description	Serial No.	Acquired	Issued	Maturity	Face Value	Underwriting Discount/Premium	Acquisition Cost	At Acquisition Date	At Closing/ Balance Sheet Date	Book Value	Market Value		Annual	How	Collected	Accrued	Accrued	Earned
														Coupon Rate	Paid*	During the Year	Previous Year	Current Year	During the Year
1	2		3	4	5	6	7	8	9	10	11	12	13= (12-11)	14	15	16	17	18	19 = (16+17-18)
DOMESTIC ISSUES:																			
FXTN:																			
1																			
2																			
3																			
4																			
5																			
TREASURY BILLS																			
1																			
2																			
3																			
Sub-total																			
FOREIGN ISSUES:																			
1																			
2																			
3																			
4																			
5																			
Sub-total																			
TOTALS																			
*Indicate whether annually, semi-monthly, quarterly or monthly.																			

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TRANQUILINO E. ESPEJON  
IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

**ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_**

**(TYPE OF PLAN)**

**SCHEDULE 2 - Cash on hand and in banks**

Name of Trustee Bank	Description	Account/ Certificate Number	DATE		Annual Rate/ Interest	Term/ Period	BALANCE		INTEREST			
			Acquisition/ Placement	Maturity			At Acquisition/ Placement Date	At Closing/ Balance Sheet Date	Collected	Accrued	Accrued	Earned
									During the Year	Previous Year	Current Year	During the Year
1	2	3	4	5	6	7	8	9	10	11	12	13
<b>Deposit in Own Bank</b>												
<b>Current Accounts:</b>												
1												
2												
3												
Sub-total												
<b>Savings Accounts:</b>												
1												
2												
3												
Sub-total												
<b>Time Deposit Accounts:</b>												
1												
2												
3												
Sub-total												
Total Deposits in Own Bank												
<b>Deposit in Other Banks</b>												
<b>Current Accounts:</b>												
1												
2												
3												
Sub-total												
<b>Savings Accounts:</b>												
1												
2												
3												
Sub-total												
<b>Time Deposit Accounts:</b>												
1												
2												
3												
Sub-total												
Total Deposits in Other Banks												
<b>GRAND TOTAL</b>												

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**TRANQUILINA E. ESPEJON**  
 IC Supervising Administrative Officer  
 Administrative Division  
 Insurance Commission

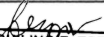
ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 3 - Mutual Funds/ UITF

Name of Trustee Bank	Description	Account /Certificate Number	Acquisition Date	Number of Units/Shares Held	Net Asset Value per Unit/Share		Acquisition Cost	Market Value	Unrealized Gain (Loss)
					At Acquisition Date	At Closing/ Balance Sheet Date			
1	2	3	4	5	6	7	8	9	10
<b>Mutual Funds</b>									
	1								
	2								
	3								
	4								
	5								
	Sub-total								
<b>Unit Investment Trust Funds</b>									
	1								
	2								
	3								
	4								
	5								
	Sub-total								
<b>Others</b>									
	1								
	2								
	3								
	4								
	5								
	Sub-total								
GRAND TOTALS									

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 4 - Short Term Investments

Name of Trustee Bank	Investment Type/Description	Account/Certificate Number	DATE		Annual Rate/Interest	Term/Period	BALANCE		INTEREST			
			Acquisition/ Placement	Maturity			At Acquisition/ Placement Date	At Closing/ Balance Sheet Date	Collected	Accrued	Accrued	Earned
									During the Year	Previous Year	Current Year	During the Year
1	2	3	4	5	6	7	8	9	10	11	12	13
	1	Special Deposit Accounts (BSP)										
	2											
	3											
	4											
	5											
	6											
	7											
	TOTAL											

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Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

**SCHEDULE 5 - Corporate Bonds**[illegible]

*\*Indicate whether annually, semi-monthly, quarterly or monthly.*

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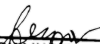
ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 6 - Mortgage loans

Name of Trustee Bank	Name and Address of Mortgagor (1)	Description of Property (TCT/CCT No.; Location; Area) (2)	Record of Mortgage: (Registry No.; Entry No.; City/Prov.; Amt of Notation) (3)	Market Value of Land Mortgaged (4)	Sound Value of Building (5)	Term of Loan		Amount of Original Loan (8)	PRINCIPAL				INTEREST				
						Date Given (6)	Date Due (7)		Amount Unpaid Dec.31 Prev Yr (9)	Loaned During the Year (10)	Paid During the Year (11)	Amount Unpaid Dec.31 Current Yr (12)	Annual Rate (13)	Collected During the Year (14)	Accrued Previous Year (15)	Accrued Current Year (16)	Earned During the Year (17)
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	
17																	
18																	
19																	
20																	
TOTALS																	

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Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 7 - Planholders' Loans

of æ k	Policyholder / Borrower (1)	Term of Loan		Contract Number (4)	Amount of Insurance (5)	Amount of Original Loan (6)	PRINCIPAL				INTEREST				
		Date of Loan (2)	Date of Maturity (3)				Amount Unpaid Dec.31 Prev Yr (7)	Loaned During the Year (8)	Paid During the Year (9)	Amount Unpaid Dec.31 Current Yr (10)	Annual Rate (11)	Collected During the Year (12)	Accrued Previous Year (13)	Accrued Current Year (14)	Earned During the Year (15)
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															
21															
22															
23															
24															
25															
TOTAL															

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Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

**SCHEDULE 8 - Stocks**[illegible]

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Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 9 - Real Estate

Name of Trustee Bank 1	CT/CCT Number.; City/Province 2	Area & Description of Lot / Building 3	Name of Vendor 4	Date Acquired 5	Estimated Life of Building 6	Actual Cost 7	Accumulated Depreciation Building 8	Net Book Value 9	Market Value per Appraisal 10	Recorded Value 11	RENTAL INCOME				Encumbrance (if Any) 16
											Collected During the Year 12	Accrued Previous Year 13	Accrued Current Year 14	Earned During the Year 15	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<u>Occupied by the Company:</u>															
Lot															
Building															
Sub-total															
<u>Investment Properties</u>															
Lot															
Building															
Sub-total															
GRAND TOTALS															

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Administrative Division  
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ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 10 - Other Investments

Name of Trustee Bank	Description	Certificate No. / Serial No.	Date Acquired	Date of Placement	Date of Maturity	Number of Shares/Units	Value per Share		Acquisition Cost (including transaction fees)	Book Value at Balance Sheet Date	Market Value	Unrealized Gain (Loss) 13 = (12-11)	INTEREST					
							At Acquisition Date	At Closing/Balance Sheet Date					Annual Rate	How Paid *	Collected During the Year	Accrued Previous Year	Accrued Current Year	Earned During the Year
1	2	3	4	5	6	7	8	9	10	11	12	13 = (12-11)	14	15	16	17	18	19
Preferred Shares:																		
1																		
2																		
3																		
Real Estate Investment Trust:																		
1																		
2																		
3																		
Tier 2 Notes:																		
1																		
2																		
3																		
Service Assets:																		
1																		
2																		
3																		
TOTAL																		
*Indicate whether annually, semi-monthly, quarterly or monthly.																		

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ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 11- Accrued Investment Income

Name of Trustee Bank	Kind of Investment	Collected During the Year	Accrued Investment Income		Unearned Investment Income		Earned During the Year (2-3+4+5-6)
			Current Year	Previous Year	Current Year	Previous Year	
1	2	3	4	5	6	7	8
	1 Interest on Government Securities						
	2 Income on Corporate Bonds						
	3 Dividends on Stocks						
	4 Income on Real Estate						
	5 Interest on Mortgage Loans						
	6 Interest on Planholders' Loans						
	7 Income on Short Term Investments						
	8 Income on Other Investments						
	9 Interest on Bank Deposits						
	Others:						
	10						
	11						
	12						
	TOTAL						

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Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 12 - OTHER ASSETS

Name of Trustee Bank	Particulars (1)	Nature of Account (2)	Balance Previous Year (3)	Balance of Current Year (4)	Remarks (2)
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
		TOTAL			

\*To be Itemized in detail.

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ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 13 - Accrued Trust Fees

Name of Trustee Bank	Particulars	Nature of Account	Balance Previous Year	Balance of Current Year	Remarks
1	2	3	4	5	6
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	TOTAL				

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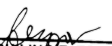
ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20\_\_ of \_\_\_\_\_

(TYPE OF PLAN)

SCHEDULE 14 - Accrued Taxes

Name of Trustee Bank	Particulars	Nature of Account	Balance Previous Year	Balance of Current Year	Remarks
1	2	3	4	5	6
	1				
	2				
	3				
	4				
	5				
	6				
	7				
		TOTAL			

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Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20__ of _____					
(TYPE OF PLAN)					
SCHEDULE 15 - Other Liabilities					
Name of Trustee Bank	Particulars	Nature of Account	Balance Previous Year	Balance of Current Year	Remarks
1	2	3	4	5	6
	1				
	2				
	3				
	4				
	5				
	6				
	7				
		TOTAL			

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Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Funds for the Year Ended December 31, 20__ of _____					
(TYPE OF PLAN)					
SCHEDULE 16 Retained Earnings					
Name of Trustee Bank	Retained Earnings, Beginning	Realized Income	Unrealized Income	Prior Period Adjustments	Retained Earnings, End
1	2	3	4	5	6
	1				
	2				
	3				
	4				
	5				
	6				
	7				
<b>TOTAL</b>					

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

ANNUAL STATEMENT of Trust Fund for the Year Ended December 31, 20\_\_ of

(TYPE OF PLAN)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ } S.S.

\_\_\_\_\_, President; \_\_\_\_\_, Vice President;  
\_\_\_\_\_, Actuary; \_\_\_\_\_, Treasurer,  
and \_\_\_\_\_, Chief Accountant of the company, being  
duly sworn, each for himself deposes and says that they are the herein described officers of the said company,  
and that on the 31st day of December last, all the herein described assets were the absolute properties of  
the said company, free and clear from any liens or claims thereon, except as therein stated, and that the  
foregoing statement, with the schedules and explanations therein contained, annexed or referred to are a full  
and correct statement of all the Assets, Liabilities, Income and Expenses and of the condition and affairs of  
the said company on the said thirty-first day of December last, and for the year ended on that date, according  
to the best of their information, knowledge and belief, respectively.

\_\_\_\_\_, President  
\_\_\_\_\_, Vice President  
\_\_\_\_\_, Actuary  
\_\_\_\_\_, Treasurer  
\_\_\_\_\_, Chief Accountant

Affix  
Documentary  
Stamps

Corporate Residence Certificate No. \_\_\_\_\_  
Issued at \_\_\_\_\_  
on \_\_\_\_\_  
Additional Residence Certificate No. \_\_\_\_\_  
issued at \_\_\_\_\_  
on \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My commission expires on December 31, \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_.

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IC Supervising Administrative Officer  
Administrative Division  
Insurance Commission

CHECKLIST OF DOCUMENTS TO BE SUBMITTED TO FORM PART OF THE ANNUAL STATEMENTS OF	
(NAME OF THE PRE-NEED COMPANY)	
For the Year Ended 31 December 20__	
A.	Scanned copy of the following, in PDF format:
1.	Audited Financial Statements (AFS) with comparative figures, signed by an External Auditor accredited by the Insurance Commission, and duly stamped by the Bureau of Internal Reveue (BIR);
2.	Adjusted Trial Balance (ATB) signed by the Chief Accountant;
3.	Reconciliation Statement of the AFS versus the ATB figures;
4.	Detailed Reconciliation Statement of Trust Fund Balances per Trustee Bank(s) versus AFS/AS;
5.	Copy of Minutes of Meeting of the Board and Executice Committees, including a copy of Board Resolutions made during the year.
6.	Actuarial Valuation Report (AVR) together with:
a.	Certification by the actuary and/or any accountable officer of the company on the actuary and completeness of the in-force files used in valuation of reserves; and
b.	Certification on the prudent adequacy of the Pre-need reserve that it shall provide at least the guaranteed contractual benefits under each pre-need contract of the company.
7.	General Information Sheet (GIS) filed with Secutities and Exchange Commission (SEC)
8.	Duly notarized Sworn Statement from the responsible officers of the company stating that:
	" Any deficiency in Trust Funds has been duly addressed, attaching the necessary documents as proofs therof";
9.	Duly Notarized Sworn Statement of the company's insurer certifying the coverage on the life insurance policies or guarantees on premium payments assumed by the insurance company, indicating the extent, trem and duration of such coverage/guarantees;
10.	BIR tax returns/payments for the year on Income Tax and Value Added Tax (VAT)
B.	Excel files of the following:
1.	Annual Statements showing the financial condition of the pre-need company and all its exhibits and schedules;
2.	Annual Statements of Trust Funds per type of plan and all its exhibits and schedules;
3.	Complete details of Exhibit 6, Exhibit 7 and Exhibit 8;
4.	Adjusted Trial Balance (ATB);
5.	Reconciliation Statement of the AFS versus the ATB figures;
6.	Detailed Reconciliation Statement of Trust Fund Balances per Trustee Bank(s) versus AFS/AS;
7.	Summary of taxes paid including Documentary Stamps Tax (DST), withholding taxes and all other taxes.

IC-PN-DP001-F-02  
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