

# **Our Products**

- Fund Provider Elite
- Fund Provider Mabuhay

#### **Get In Touch**

3/F Katipunan Building 95 E. Rodriguez Sr. Blvd. Quezon City, Philippines

Phone: 8635-7181 | 8635-7177 | 8365-7176

Fax: 8635-7181 | 8635-7177

Hours: Mon - Fri : 8:30 am - 5:30 pm

Email: Info@cfpi.com.ph

#### **Additional Resources**

Caritas Financial Plans, Inc.
Senior Officers & Management Team
Corporate Govermance
Inquiries & Concerns
Our Branches
FAQs
Privacy Policy
Terms and conditions

# **Caritas Group of Companies**

	First Name	Middle Name	Suffix
Age Birth Date mm/dd/yyyy	Relation to the Planhold	der Gender Birth Place	Citizenship
Contact Number	Email Address	Address	
☐ I have not been co☐ I have not been tre ☐ mental impairmen	nd in good health) 18 years old or more than 60 nfined in any hospital, sanitar	years and 6 months of age at my nearest bird rium or infirmary, nor received medical or surg blood pressure, cancer, diabetes, lung, kidne	•
		s below. Write "N.A." if not applicable.	
Pate of Latest Confinement/C mm/dd/yy	heck-up Name of Hos	рпал Сппс	
nsurance Benef	iciary		
nsurance Benef	First Name	Middle Name	Suffix
			Suffix Citizenship
ast Name  Age Birth Date	First Name		
Age Birth Date mm/dd/yyyy  Contact Number  Trustee f any of the beneficiary is under 18 years	First Name  Relation to the Planhold  Email Address	der Gender Birth Place	
Age Birth Date mm/dd/yyyy	First Name  Relation to the Planhold  Email Address  ars of age)	der Gender Birth Place  Address  Middle Name	Citizenship

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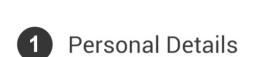
Email: Info@cfpi.com.ph

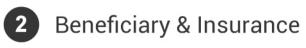
8365-7176 c: 8635-7181 | 8635-7177

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# Caritas Group of Companies









Product Details & Attachments



Confirmation

# **Contract Provisions**

Caritas Fund Provider "Plan Name".pdf 1 / 2



# THE CARITAS FUND PROVIDER "PLAN NAME" CONTRACT PROVISIONS

The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Ju

The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog.

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The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog The Quick Brown Fox Jumps Over the Lazy Dog.

I understand that checking this box constitutes a legal signature confirming that I have downloaded, read, acknowledge and agree to the terms and conditions as stated in the contract provisions.

Cancel

Proceed

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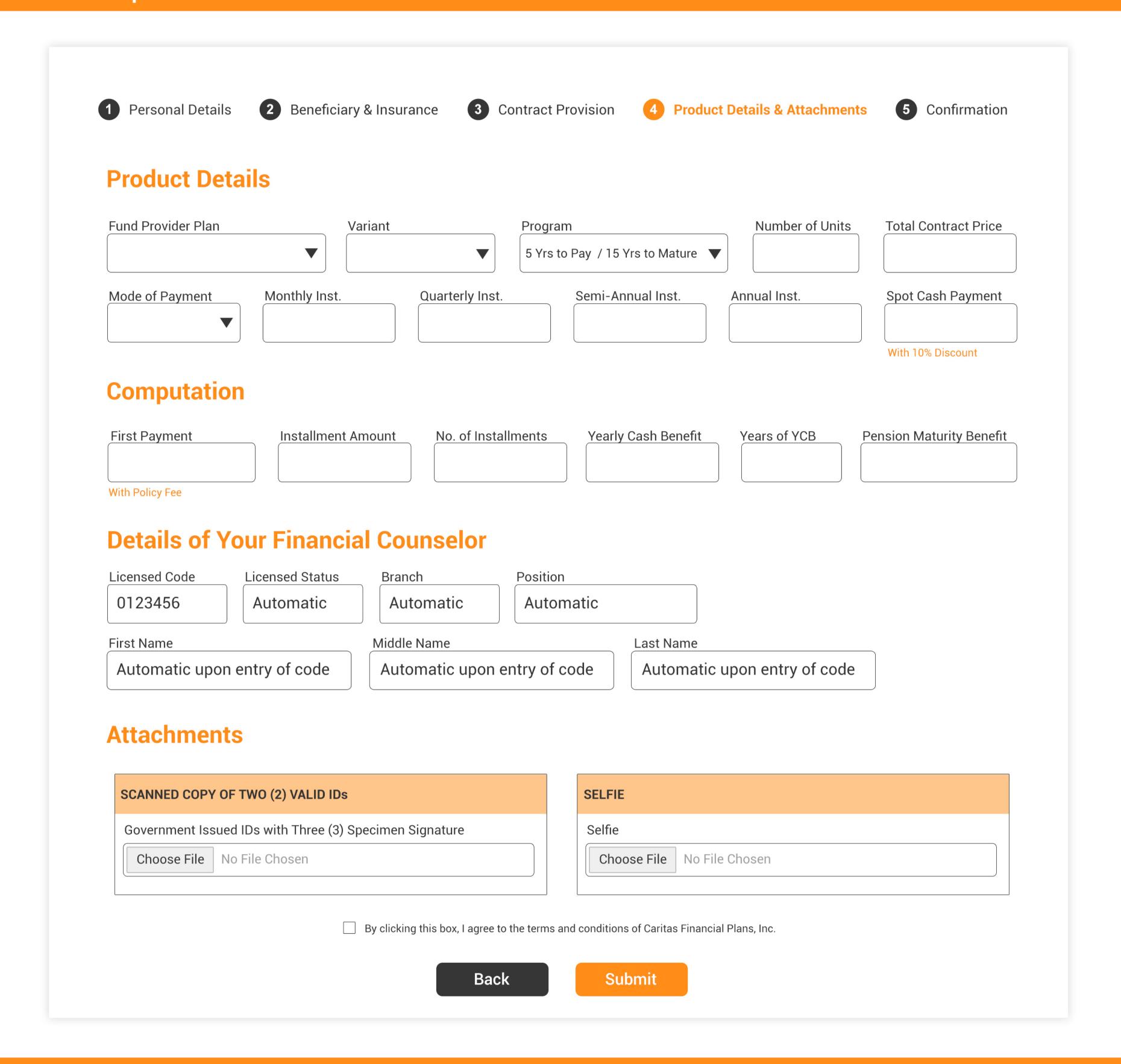
Hours: Mon - Fri : 8:30 am - 5:30 pm

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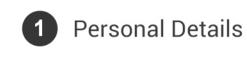
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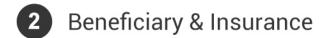
Email: Info@cfpi.com.ph

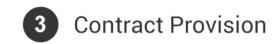
#### **Additional Resources**

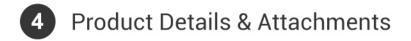
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#### **Caritas Group of Companies**











# **Congratulations!**

Your Pension Plan Application has been created and submitted sucessfully!

Your Pension Plan Application Number

# PPA-2020-000001 RICHARD R. RAYMUNDO

**Check & Update** 

**Payment Options** 

**Cancel Application** 

Exit





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#### **Caritas Group of Companies**



# **CFPI APPLICATION**

# PPA-2020-00001

Application Status : FOR REVIE	W Pa	ayment Status	: UNPAID	Policy Status	: N/A		
Application Status Date: 29-0CT-20	20 Pa	ayment Reference Numbe	er: N/A	Policy Status	Date: N/A		
Personal Data							
Your Last Name	Υ	our First Name		Your Middle N	lame	Suffix	
RAYMUNDO		RICHARD		ANONYM	OUS		
Age Birthdate	Birth Place		Gender		Civil Stat	us	
20 01/01/2000	LUZON		MALE		SINGI	_E	
Nationality	ACR# (For Fo	oreigners)	Tin Number		GSIS/SS	S Number	
FILIPINO	N.A		123		123		
Spouse Last Name	Sp	ouse First Name	Spouse Mic	ldle Name		Spouse Suffix	
N.A  Contact Details  Address (Unit House Number, Street	, Subdivision, Bara	angay) City	N.A //Municipality	Region		N.A Zip Code	<u>;</u>
Contact Details  Address (Unit House Number, Street  95 KATIPUNAN BLDG, E. ROD	, Subdivision, Bara	angay) City GY. TATALON	N.A  V/Municipality  UEZON CITY			Zip Code	9
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account	, Subdivision, Bara RIGUEZ SR. BR Mobile Numbe	ngay) City GY. TATALON QI	N.A  N.A  V/Municipality  UEZON CITY  Mobile Number 2	Region		Zip Code 1121 hone Number	2
N.A  Contact Details  Address (Unit House Number, Street  95 KATIPUNAN BLDG, E. ROD	, Subdivision, Bara	ngay) City GY. TATALON QI	N.A  V/Municipality  UEZON CITY	Region	Home Telep	Zip Code 1121 hone Number	2
Contact Details  Address (Unit House Number, Street  95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM	, Subdivision, Bara RIGUEZ SR. BR Mobile Numbe	nngay) City GY. TATALON  er 1	N.A  N.A  V/Municipality  UEZON CITY  Mobile Number 2	Region		Zip Code 1121 hone Number	2
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine	, Subdivision, Bara RIGUEZ SR. BR Mobile Number 090909090	ngay) City GY. TATALON  er 1  190	Municipality UEZON CITY  Mobile Number 2  09060606060	Region		Zip Code 1121 hone Number	2
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine  Source of Income	, Subdivision, Bara RIGUEZ SR. BR Mobile Number 090909090	nngay) City GY. TATALON  er 1	Municipality UEZON CITY  Mobile Number 2  09060606060	Region		Zip Code 1121 hone Number	2
Contact Details  Address (Unit House Number, Street  95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine  Source of Income  EMPLOYMENT	, Subdivision, Bara RIGUEZ SR. BR Mobile Number 090909090	angay) City GY. TATALON  er 1  990  specify nature if source of	Municipality UEZON CITY  Mobile Number 2  09060606060	Region	8635-00	Zip Code 1121  hone Number 00	<u>e</u>
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine  Source of Income  EMPLOYMENT  Name of Company	, Subdivision, Bara RIGUEZ SR. BR Mobile Number 090909090	angay) City GY. TATALON  er 1  population of the specify nature if source of the specify nature of Business	Municipality UEZON CITY  Mobile Number 2  09060606060	Region NCR	8635-00	Zip Code 1121 hone Number	2
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine  Source of Income  EMPLOYMENT  Name of Company  CFPI	, Subdivision, Bara RIGUEZ SR. BR Mobile Number 090909090	angay) City GY. TATALON  er 1  990  specify nature if source of	Municipality UEZON CITY  Mobile Number 2  09060606060	Region NCR	8635-00 Yea	N.A  Zip Code 1121  hone Number 00	2
Contact Details  Address (Unit House Number, Street 95 KATIPUNAN BLDG, E. ROD  Email Account  EMAIL@GMAIL.COM  Employment/Busine  Source of Income  EMPLOYMENT  Name of Company	, Subdivision, Bara RIGUEZ SR. BR Mobile Numbe 090909090	ingay) City GY. TATALON  er 1 D90  Specify nature if source of Nature of Business PRE-NEED	Municipality UEZON CITY  Mobile Number 2  09060606060	Region NCR	8635-00	Zip Code 1121 hone Number 00	<u>-</u>

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# **CFPI APPLICATION**

# PPA-2020-00001

pplication Status : <b>FOR REVIEW</b>	Payment Status :	UNPAID	Policy Status	: N/A	
pplication Status Date: 29-OCT-2020	Payment Reference Number:		Policy Status Date		
	r dyffietht fielefelide Ndiffber.		Tolley Status Date	C. 11/A	
Pension Beneficiary					
_ast NameFirst Nam	e	Middle Name		Suffix	
RAYMUNDO	RD	ANONYMOUS			
Age Birth Date Relation to the	Planholder Gender	Birth Place			Citizenship
20 01/01/2000 FRIEND	MALE	BATANES			FILIPINO
Contact Number Email Address	Address				
090909090 EMAIL@YAH	DO.COM 95 KATIPUN	IAN BLDG., E. ROD	DRIGUEZ SR. BL	VD., QU	EZON CITY
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# **CFPI APPLICATION**

# PPA-2020-00001

UPDATED AS OF: OCTOBER 29, 2020		
Application Status : FOR REVIEW	Payment Status : UNPAID	Policy Status : N/A
Application Status Date: 29-OCT-2020	Payment Reference Number: N/A	Policy Status Date: N/A

# **Product Details**

Fund Provider Plan		Variant		Program	1	Number of Units	Total Contract Price
FP ELITE		PLAN A		5 YRS	TO PAY / 15 YRS TO I	MA 20	364,000.00
Mode of Payment	Monthly Inst		Quarterly Inst.		Semi-Annual Inst.	Annual Inst.	Spot Cash Payment
Annual	6,674.00		19,656.00		38,584.00	72,800.00	327,750.00
							With 10% Discount

# Computation

First Payment	Installment Amount	No. of Installments	Yearly Cash Benefit	Years of YCB	Pension Maturity Benefit
72,950.00	72,800.00	5	20,000.00	10	200,000.00
With Policy Fee			Longevity Benefit Amount<br if Mabuhay instead of Yearly Cash Benefit>	Remove Years of YCB if Mabuhay	
Details of Your	Financial Cou	nselor			

Position

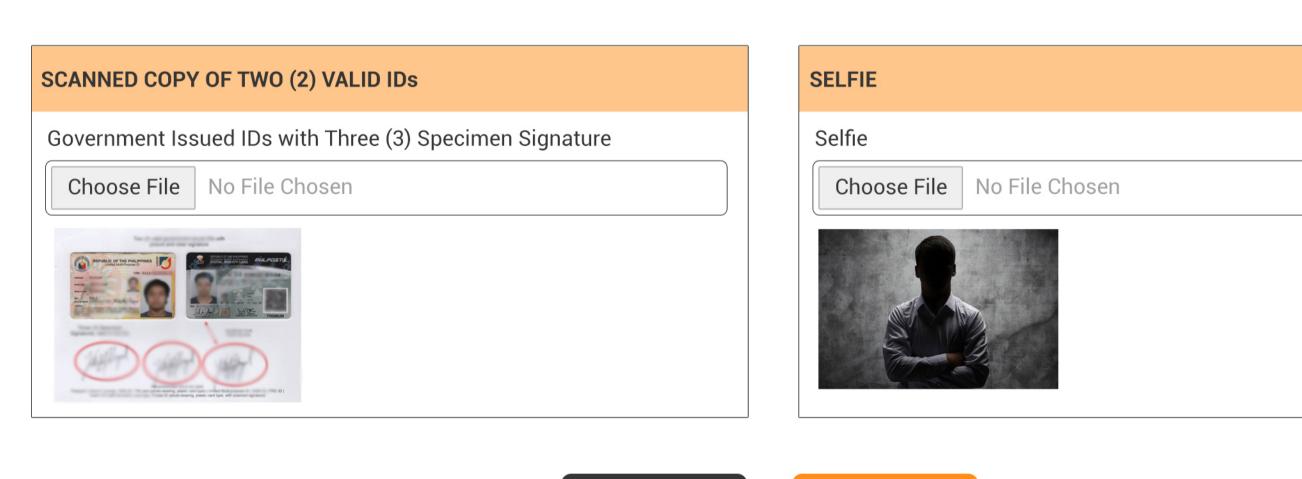
**Licensed Status** 

0123456	Automatic	Automatic	Automatic		
First Name		Middle Name		Last Name	
Automatic upor	entry of code	Automatic upon en	try of code	Automatic upon entry of code	

Branch

# **Attachments**

Licensed Code



Back

**Submit** 

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# **Caritas Group of Companies**

Date & Time: 29-OCT-2020

# **CONGRATULATIONS!**

# RICHARD R. RAYMUNDO

Your Pension Plan Application Number

PPA-2020-000001

Has been sucessfully updated.

**Check & Update** 

**Payment Options** 

**Cancel Application** 

**Exit** 





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# **Product Details**

Fund Provider Plan

Variant

Program

<!--If Mabuhay

**Longevity Benefit Amount** 

**Pension Maturity Benefit** 

**Contract Provision Applies** 

**Total Cash Benefits** 

**Insurance Benefits** 

Subject for aproval

Number of Units

Yearly Cash Benefit Amount

Yearly Cash Benefit Term

**Yearly Cash Benefit in Total** 

**Pension Maturity Benefit** 

#### **Total Cash Benefits**

Insurance Benefits
Subject for approval
Contract Provisions Applies

**Fund Provider Elite** 

Plan A

5 yrs. to pay / 15 yrs. to mature

20

P20,000.00

10 Years

P200,000.00

P200,000.00

#### P400,000.00

Credit Life, Disability Benefit Term Life, Accidental Death Benefit

<!-- No Accidental Death Benefit if Mabuhay -->

# **Payment Information**

#### **Mode of Payment**

Annual

Total Contract Price P364,000.00

Installment Amount P72,800.00

One-Time Policy Fee P150.00
Installment Amount P72,800.00
First Payment P72,950.00

**Amount To Pay P72,950.00** 

# **PAYMENT OPTIONS**

# **Online Payment**

# **Card Details**

VISA MasterCar

V

**Card Number:** 

CVV Number :

Card Type:

Name on Card:

**Expiry:** 

Email Address : (Optional)

# **Bank Deposit**

# **Deposit Slip**

**Bank Name:** 

Transaction Number:

Attachment:

01		
Choose	File	

Screnshots or Scaned copy of Deposit Slip/Transaction

#### **Our Products**

- Fund Provider Elite
- Fund Provider Mabuhay

Back Submit

#### **Get In Touch**

3/F Katipunan Building 95 E. Rodriguez Sr. Blvd. Quezon City, Philippines

Phone: 8635-7181 | 8635-7177 | 8365-7176

Fax: 8635-7181 | 8635-7177

Hours: Mon - Fri : 8:30 am - 5:30 pm

Email: Info@cfpi.com.ph

#### **Additional Resources**

Caritas Financial Plans, Inc.
Senior Officers & Management Team
Corporate Governance
Inquiries & Concerns
Our Branches
FAQs
Privacy Policy
Terms and conditions

#### **Caritas Group of Companies**

# Congratulations! Your payment has been successfully submitted.

An e-receipt will be sent to your email once the transaction has been verified. Should you have any further questions, please contact us at 8635-7176 or 8635-7177.

Your Pension Plan Application Number

PPA-2020-000001
RICHARD R. RAYMUNDO

**Check For Updates** 

**Home Page** 





#### **Our Products**

- Fund Provider Elite
- Fund Provider Mabuhay

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#### **Caritas Group of Companies**

# Confirmation Are you sure to cancel this application? Close Proceed

E. SSSS Carriage Treasured Plans, Inc., Mr rights reserved

Date & Time: 29-007-2020

EXPENSES DO NOT STOP WHEN YOU RETIRE! Introducing our Fund Provider Elite. It is specially designed to further augment your income during your productive years through the YEARLY CASH BENEFIT and provide pension for you retirement years.

# **FUND PROVIDER ELITE PLAN VARIANTS**

#### Plan A

10-year YCB amounting to 10% of Pension Benefit before your plan's maturity date.

#### Plan B

10-year YCB amounting to 20% of Pension Benefit before your plan's maturity date.

# Plan C

5-year YCB amounting to 25% of Pension Benefit before your plan's maturity date.

# Plan D

5-year YCB amounting to 50% of Pension Benefit before your plan's maturity date.

# **PROGRAMS**

5/15 - 5 Years to Pay & 15 Years to Mature

5/20 - 5 Years to Pay & 20 Years to Mature

**Entry age for Insurance Eligibility:** 18 to 60 years old & in Good Health

# **GET A PLAN NOW!**

Already have an existing application? Click Here

# **FEATURES & BENEFITS**

#### **Long Term Pension Program**

Received a guaranteed pension benefit either 15 or 20 years depending on the chosen program and settlement options.

#### **Yearly Cash Benefit (YCB)**

A Yearly Cash Benefit amount equivalent to 10%, 20%, 25% or 50% from ten (10) or five (5) succesive years before the plan's maturity date.

#### **Pension Benefit**

A full amount of the chosen pension benefit will be given to the planholder or to the pension beneficiary (in case death) upon reaching the plan's maturity date.

# **Insurance Coverage**

# **Credit Life Insurance**

Should the planholder passed away during the paying period, the unpaid balance of the Contract Price installement is waived.

# **Total Disability Benefits**

Should the planholder become totally disabled. the unpaid balance of the Contract Price installment is waived.

# **Term Life Insurance**

Should the planholder passed away within the term of the pension plan, the insurance beneficiary will be entitled to an amount equivalent to 100% of the Pension Benefit.

# **Accidental Death Benefit**

Should the planholder passed away as a result of an injury sustained in an accident, the insurance beneficiary will be entitled to an additional amount equivalent to the pension benefit.

# **Flexible Mode of Payments**

Flexible mode of payments were designed for our planholder's convenience such as: Monthly, Quarterly, Semi-Annual, Annual Installment or Spot Cash.

# Reinstatement

In case failure of payments after the given period, the pension plan is considered lapsed and all benefits due will be suspended. However, two (2) years will still be given after the grace period to reinstate the plan.

# **Guaranteed Cash Benefit (Non Forfeiture of Contributions)**

If your lapsed plan remains unreinstated after the given reinstatement period, you will still be entitled to a cash benefit upon the prescribed maturity date.

Terms and condition of FP Elite Contract Provision applies

# **Our Products**

- Fund Provider Elite
- Fund Provider Mabuhay

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# **Caritas Group of Companies**

# PRIVACY NOTICE (CFPI-PN-RMD-0001 rev.00)

Caritas Financial Plans, Inc. (CFPI) as incorporated and registered with the Securities and Exchange Commission. and is licensed to operate as a Pre-Need Company. CFPI is a 100% subsidiary of CARITAS HEALTH SHIELD, INC., the umbrella organization of the Caritas Group of Companies. Your privacy is very important to us. We want to assure you that CFPI holds all your personal information in the strictest confidence. We are committed to safeguarding your personal information pursuant to the provisions of the Data Privacy Act of 2012 (RA 10173).

CFPI as the Personal Information Controller (PIC) has mandated its Data Protection Officer (DPO) who ensures adherence to the Data Privacy Act, its implementing rules and regulations and other relevant issuance of the National Privacy Commission. Any feedback or queries regarding this privacy notice and our data privacy practices must be coordinated with the DPO. Contact details are the following:

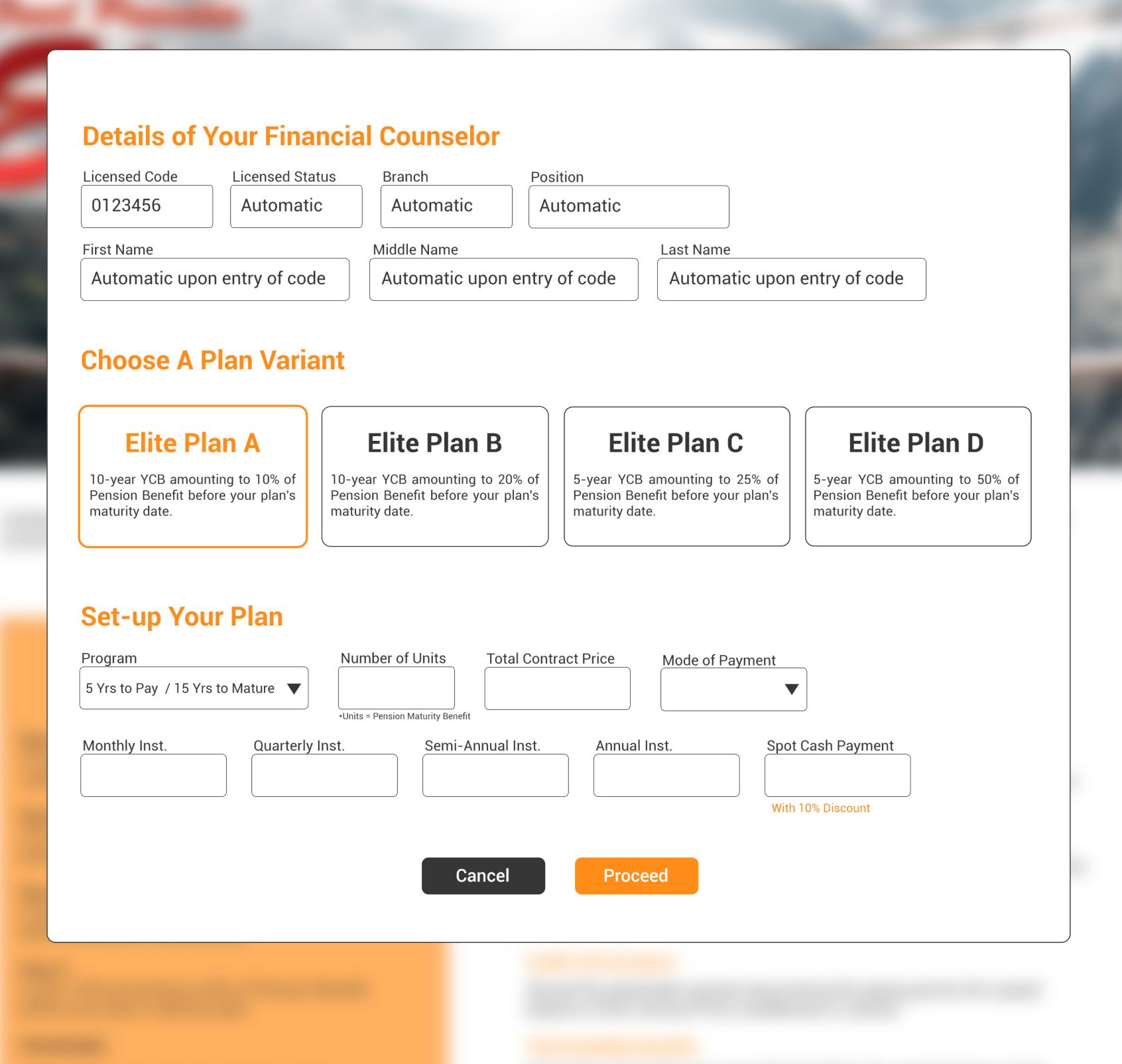
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Telephone: (02) 8635-7181 | (02) 8635-7177 | (02) 8365-7176

Email Address: info@cfpi.com.ph

Close

Accept & Proceed





ARE YOU PREPARED TO LIVE LONG? Introducing our Fund Provider Mabuhay. A disciplined savings scheme with a fixed number of contributions within a specific number of years that will ensure a predetermined amount of pension fund upon a specific future date.

# FUND PROVIDER MABUHAY **PLAN VARIANTS**

# **Mabuhay CLassic**

Will provide you the Pension Benefit and the basic protection of the Credit Life Insurance & Total Disability Benefit.

#### **Mabuhay Ultima**

Will provide you a Longevity Benefit and the extra protection of a Term Life Insurance along with the basic benefits under the Fund Provider Classic.

# **Mabuhay Ultima Plus**

Will likewise provide you the basic benefits featured under Fund Provider Classic, plus Term Life Insurance coverage and an increased Longevity Benefit.

# **PROGRAMS**

**5/15** - 5 Years to Pay & 15 Years to Mature

**5/20** - 5 Years to Pay & 20 Years to Mature

5/25 - 5 Years to Pay & 25 Years to Mature

**5/30** - 5 Years to Pay & 30 Years to Mature

**Entry age for Insurance Eligibility:** 18 to 60 years old & in Good Health

# **GET A PLAN NOW!**

Already have an existing application? Click Here

# **FEATURES & BENEFITS**

#### **Long Term Pension Program**

Received a guaranteed pension benefit either 15, 20, 25 or 30 years depending on the chosen program and settlement options.

#### **Longevity Benefit (for Mabuhay Ultima & Ultima Plus Only)**

A Longevity Benefit amount equivalent to 100% or 200% of the chosen pension benefit will be given in case the planholder outlives the plan's maturity date.

#### **Pension Benefit**

A full amount of the chosen pension benefit will be given to the planholder or to the pension beneficiary (in case death) upon reaching the plan's maturity date.

# **Insurance Coverage**

# **Credit Life Insurance**

Should the planholder passed away during the paying period, the unpaid balance of the Contract Price installement is waived.

# **Total Disability Benefits**

Should the planholder become totally disabled. the unpaid balance of the Contract Price installment is waived.

# **Term Life Insurance**

Should the planholder passed away within the term of the pension plan, the insurance beneficiary will be entitled to an amount equivalent to 100% of the Pension Benefit.

# **Flexible Mode of Payments**

Flexible mode of payments were designed for our planholder's convenience such as: Monthly, Quarterly, Semi-Annual, Annual Installment or Spot Cash.

# Reinstatement

In case failure of payments after the given period, the pension plan is considered lapsed and all benefits due will be suspended. However, two (2) years will still be given after the grace period to reinstate the plan.

# **Guaranteed Cash Benefit (Non Forfeiture of Contributions)**

If your lapsed plan remains unreinstated after the given reinstatement period, you will still be entitled to a cash benefit upon the prescribed maturity date.

Terms and condition of FP Mabuhay Contract Provision applies

# **Our Products**

- Fund Provider Elite
- Fund Provider Mabuhay

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Email Address: info@cfpi.com.ph

Close

Accept & Proceed

# **Details of Your Financial Counselor** Licensed Code Licensed Status Branch Position 0123456 **Automatic** Automatic Automatic Middle Name First Name Last Name Automatic upon entry of code Automatic upon entry of code Automatic upon entry of code **Choose A Plan Variant Mabuhay Ultima Plus Mabuhay Classic Mabuhay Ultima** Will provide you the Pension Benefit and the Will provide you a Longevity Benefit and the extra protection of a Term Life Insurance along Will likewise provide you the basic benefits featured under Fund Provider Classic, plus Term basic protection of the Credit Life Insurance and Total Disability Benefit. Life Insurance coverage and an increased with the basic benefits under the Fund Provider **Longevity Benefit** Classic. **Set-up Your Plan** Number of Units Program **Total Contract Price** Mode of Payment 5 Yrs to Pay / 15 Yrs to Mature 🔻 \*Units = Pension Maturity Benefit Monthly Inst. Quarterly Inst. Semi-Annual Inst. Annual Inst. **Spot Cash Payment** With 10% Discount Cancel Proceed

PPA Number (PPA	A-2020-XXXXXX)	
0000001		
First Name		
RICHARD		
Middle Name		
ANONYMOUS	3	
Last Name		
RAYMUNDO		

Your Pension Plan Application Number

# PPA-2020-000001 RICHARD R. RAYMUNDO

**Check & Update** 

**Payment Options** 

Cancel Application

Exit





#### **Our Products**

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