

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

### CERTIFICATION

I/WE hereby certify that the **COOPERATIVE INSURANCE SYSTEM OF THE PHILIPPINES (CISP)** or any of its officers, directors, stockholders, agents, employees, assigns and successors-in-interest an employees shall not be held liable and / or responsible for any and all claims and/or liabilities, of whatsoever kind or nature, by the beneficiaries or the compulsory heirs of (Name of Insured) with regard to the deceased's insurance/ death benefits.

This is to certify further that, from any and all claims and/or liabilities, of whatsoever kind or nature, arising from the disbursement/ release of the insurance benefits of deceased, (Name of Insured), shall be assumed by and/or for the account of (Name of Cooperative).

This certification is issued to the Cooperative Insurance System of the Philippines for the processing of the Insurance Claims.

Signature over Printed Name  
Manager

With our Conformity:

Signature over Printed Name  
Chairperson

Signature over Printed Name  
Vice Chairperson

Signature over Printed Name  
Board Member

Doc. No. \_\_\_\_\_  
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Series of 2015 \_\_\_\_\_

Notary Public

Not Valid  
Without Coop  
Dry Seal

Note: A mark, erasure or alteration of any entry invalidates this certification.