

) Picture

Meralco Employees Mutual Aid and Benefits Association, Inc. (MEMABA, Inc.)
Employee Services Center, Meralco Center, Ortigas Ave. Pasig City, 1605
Phone Nos.: 1622-6993 to 94, 6069, 3936 and 3930, 0908-888-5821
memaba.staff@meralco.com.ph | www.memaba.com.ph

APPLICATION FOR BENEFITS CLAIM

					Date	
NAME						
ADDRESS						
OFFICE						
	Purpose:					
	· 	_ VICTIM				
	Full					
	Partial				•	
	, 20 ied for and	the required pr	oofs/ evidence/ doc ute ground for disc	tuments in s ciplinary action	failure to submit on or upport to the claim for on and will subject me ne.	benefit
				Signature	of Member/ Claimant	
					Man No.	
				Loca	al/Telephone No.	
Recommend	d Approval of	Donation.				
Recommend	ded:		Audite	d:		
					Auditor	_
Endorsed:		Appro	Approved by:			
GRE	GORIO P. FI	GUEROA, JR.				
ı	Head, Memal	oa, Inc.		Воа	rd Member	
Att. :		estigation Report angay Certificate				