



SERVIAMUS MUTUAL BENEFIT ASSOCIATION INC.
4th Floor, Diocesan Centrum Bldg., Lluch St. Poblacion, Iligan City
Telephone: (063) 223-2493, 228-4354 Email: serviamus_mba@yahoo.com

DISCLOSURE STATEMENT

This Disclosure Statement intends to prevent any misunderstandings, arguments, or lawsuits of any kind and to ensure unbiased, independent, and objective decision-making. The trustees and key officers shall accomplish this form before the start of his/her engagement with Serviamus Mutual Benefit Association, Inc., and shall be updated every year thereafter.

Name : REV. FR. ENRIQUE R. LACOSTALES
Address : PANOLO-ON, SAPAD, LANA DEL NORTE
Position at SMBA : BOT President

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:


Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction _____


REV. FR. ENRIQUE R. LACOSTALES
Signature over Printed Name



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Name : ROMANITO R. TAN
 Address : NAAWAN, MISAMIS ORIENTAL
 Position at SMBA : BOT VICE-PRESIDENT

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:


Name of Organization: _____
 Address: _____
 Position: _____
 Since When: _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
 Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction _____


ROMANITO R. TAN
 Signature over Printed Name



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Name : REV. FR. RODRIGO R. MAATA
Address : OUR LADY OF PERPETUAL HELP CONVENT, LINAMON,
LANAO DEL NORTE
Position at SMBA : BOT Treasurer

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

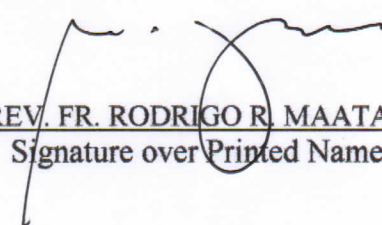
Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction _____


REV. FR. RODRIGO R. MAATA
Signature over Printed Name



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Name : LILIAN C. BALEROS
Address : P-9, POBLACION KOLAMBUGAN, KOLAMBUGAN
LANAO DEL NORTE
Position at SMBA : BOT SECRETARY

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

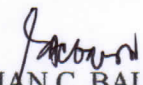
Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction _____


LILIAN C. BALEROS
Signature over Printed Name



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Name : ELNA S. CAUMERAN
Address : P-4 BRGY. STA. ELENA, ILIGAN CITY
Position at SMBA : BOT MEMBER

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

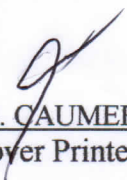
Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

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If yes, please specify the nature of the transaction _____


ELNA S. CAUMERAN
Signature over Printed Name



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Name : LILIA N. ALAVANZA
Address : P-2 PATAG, NAAWAN MISAMIS ORIENTAL
Position at SMBA : BOT MEMBER

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? Yes No

If yes, please provide details:

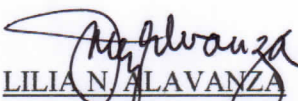
Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? Yes No

If yes, please specify the nature of the transaction _____


LILIA N. ALAVANZA
Signature over Printed Name



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Name : AVELINA A. SUERTE
Address : BAROY DACU, BAROY LANA DEL NORTE
Position at SMBA : BOT MEMBER

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

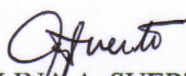
Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer _____
Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction : _____


AVELINA A. SUERTE
Signature over Printed Name



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Name : GODOFREDO S. LUMBO JR.
 Address : A-6, ISABEL RAMIRO ST., STO. ROSARIO, ILIGAN CITY
 Position at SMBA : BOT Independent Member

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:


Name of Organization: N/A
 Address : _____
 Position : _____
 Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

If yes, please provide name of staff/volunteer N/A
 Position of staff/volunteer _____

3. Do you have any present or on-going personal financial transaction at SMBA that could be perceived as potential conflict of interest? ___ Yes No

If yes, please specify the nature of the transaction N/A


GODOFREDO S. LUMBO JR.
 Signature over Printed Name



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Name : REV. FR. ANDRES C. CASES JR.
Address : CHRIST THE KING PARISH CONVENT, MARANDING
LALA, LANA DEL NORTE
Position at SMBA : Board Adviser

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

Name of Organization: _____
Address : _____
Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

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REV. FR. ANDRES C. CASES JR.
Signature over Printed Name



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Name : REV. FR. RODOLFO M. ENCABO
Address : CORPUS CHRISTI PARISH, BRGY. TUBOD ILIGAN CITY
Position at SMBA : BOT Independent Member

1. Are you an incumbent trustee of other Mutual Benefit Association and other similar organizations? ___ Yes No

If yes, please provide details:

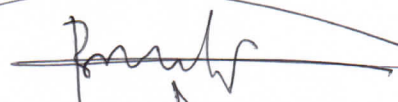
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Position : _____
Since When : _____

2. Do you have immediate family member who is presently working as a staff or volunteer at SMBA? ___ Yes No

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Position of staff/volunteer _____

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REV. FR. RODOLFO M. ENCABO
Signature over Printed Name