



**Philippine Ports Authority Employees Development Cooperative**  
Marsman Building, Muelle de San Francisco Street, South Harbor, Port Area, Manila

## **APPLICATION FOR MEMBERSHIP**

I hereby apply for membership in the PPA Employees Development Cooperative, Inc. (PPAEDCO). I agree to obey faithfully its rules and regulations as set down in its Articles of Incorporation and By-Laws, the decision of the general membership meetings and those of the Board of Directors.

I hereby pledge to:

1. Attend and finish the prescribed pre-membership education courses <sup>/1</sup>;
2. Pay the membership fee of One Hundred Pesos Only (P100.00);
3. Participate in the following savings programs:
  - a) Subscribed for at least \_\_\_\_\_ shares <sup>/2</sup> and pay for them in lumpsum or installments, under the terms and conditions prescribed in the Membership and Subscription Agreement.
  - b) Contribute into the Share Capital an amount prescribed by the applicant and in accordance with the manner and schedule as may be determined.
  - c) Contribute into the Share Capital a portion of the annual interest and patronage refund due me equivalent to the percentage prescribed.
4. Comply with the membership and subscription agreement.

Attached are duly accomplished forms for this purpose, namely: (a) Membership & Subscription Agreement, (b) Member's Information Sheet, and (c) Authorization for Payroll Deduction

For your consideration.

\_\_\_\_\_  
Signature over Printed Name

\_\_\_\_\_  
Department

<sup>/1</sup> Please coordinate with the Chairperson-Membership & Education Committee for training schedule

<sup>/2</sup> One share amounts to One Hundred Pesos (P100.00). As a condition for an applicant to be accepted into the Cooperative, a minimum of fifty (50) shares of Five Thousand Pesos (P5,000.00) must be paid. (Board Resolution No.256-2007 passed on 27 March 2007)



Philippine Ports Authority Employees Development Cooperative  
**MEMBERSHIP AND SUBSCRIPTION AGREEMENT**

**The Board of Directors**

PPA Employees Development Cooperative, Inc.  
Marsman Building, Muelle de San Francisco St.  
South Harbor, Port Area  
Manila

Gentlemen:

I, \_\_\_\_\_ a resident of \_\_\_\_\_

hereby agree to be a member of the PPA Employees Development Cooperative, Inc. (PPAEDCO) I have completed the training course prescribed for prospective members and I understand the purposes and objectives of this Cooperative.

In connection with such membership, I hereby agree to the following terms and conditions:

1. To comply with the provisions of the Articles of Incorporation, the By-Laws and policies set by the Board, the General Assembly, as well as acts of duly constituted authorities and failure on my part to do so, the Cooperative, at its option, may:
  - a. Fine;
  - b. Suspend; or,
  - c. Expel me from membership, whereupon all my shareholding shall be answerable for my liabilities to the Cooperative.
2. To attend all meetings, conferences, and seminars as required by the Board of Directors and failure on my part to do so, unless previously excused by the Board, to pay the fine in the amount prescribed by the Board of Directors to make up for the activity I have missed;
3. To participate in the planned thrift and savings program by:
  - a. Subscribing for at least \_\_\_\_\_ shares valued at \_\_\_\_\_ (P \_\_\_\_\_) and paying for them either in lumpsum or in regular instalments. If on installments, to pay at least the value of minimum number of shares upon approval of the Board of my application for membership and the balance in regular monthly installments of \_\_\_\_\_ (P \_\_\_\_\_);
  - b. Contribute into the Share Capital an amount in accordance with the manner and schedule as may be determined.
  - c. Contribute into the Share Capital a portion of the annual interest and patronage refund due me equivalent to the percentage prescribed.

4. To pay the membership of P\_\_\_\_\_.
5. To comply with the directive of the duly constituted authorities as well as the decisions of the Board regarding the policies of Cooperative

NOTE:

Other conditions may be depending upon the nature of the business of the Cooperative:

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The provisions of this Agreement, The Articles of Incorporation and By-Laws have been explained to me and understand them and agree to abide with all of them.

In all of the above undertakings, I am aware that the Board of Directors of the Cooperative may impose sanctions against me or perform any acts necessary to make the sanction(s) effective without going to court.

IN WITNESS HEREOF, I have hereunto affixed my signature/right thumbmark this \_\_\_\_\_ day \_\_\_\_\_ 200\_\_.

\_\_\_\_\_  
Signature of the Applicant/Member



Right Hand  
Thumbmark



**MEMBER'S INFORMATION SHEET**



**Business Activities:**

Present \_\_\_\_\_

Previous \_\_\_\_\_

**Other source of Income:**

| a. Crop Production              | Total Production | Share | Value |
|---------------------------------|------------------|-------|-------|
| 1. Major _____<br>(Specify)     | _____            | _____ | _____ |
| 2. Secondary _____<br>(Specify) | _____            | _____ | _____ |

b. Livestock Production (Specify)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

c. Others (include income of spouse and children)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been accused or convicted of any crime? If in the affirmative, please specify.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Give the names and addresses of at least two (2) reliable persons who can vouch for your character:

| Name  | Address |
|-------|---------|
| _____ | _____   |
| _____ | _____   |

**CERTIFICATION**

I HEREBY CERTIFY, that the above information is true and correct to the best of my knowledge,  
 signed this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Signature of Applicant over Printed Name

Signed in the presence of:

\_\_\_\_\_

\_\_\_\_\_



Philippine Ports Authority Employees Development Cooperative  
**AUTHORIZATION FOR PAYROLL DEDUCTION**

- FOR  **THE MANAGER, PERSONNEL DIVISION**  
(For Head Office)
- THE MANAGER, RESOURCE MANAGEMENT DIVISION**  
(For PDOs/PMOs)

I hereby authorized you to deduct from my weekly/bi-monthly pay the total amount of \_\_\_\_\_  
 \_\_\_\_\_ PESOS (P \_\_\_\_\_) beginning \_\_\_\_\_, 200\_\_ to  
 \_\_\_\_\_, 200\_\_ and to remit the said amount to PPAEDCO for credit to my:

|                               | <u>Please Check</u> |
|-------------------------------|---------------------|
| 1. Share Capital Contribution | (        )          |
| 2. Time Deposit               | (        )          |
| 3. Savings Deposit            | (        )          |
| 4. Others                     | (        )          |

This authorization shall be revoked only upon written consent of PPAEDCO.

\_\_\_\_\_  
Signature Over Printed Name

NOTED:

\_\_\_\_\_  
The Manager, Personnel Division /  
Resource Management Division

NOTED:

\_\_\_\_\_  
General Manager, PPAEDCO

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To be accomplished in two (2) copies, one for PPA Office concerned and one for PPAEDCO