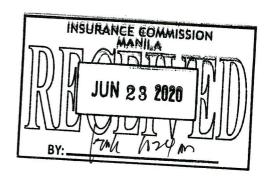




June 22, 2020

ATTY. DENNIS B. FUNA COMMISSIONER

Insurance Commission 1071 United Nations Avenue Ermita, Manila



Subject:

SUBMISSION OF QUARTERLY REPORTS

(First Quarter - Year 2020)

Dear Atty. Funa:

We hereby submit our Quarter Report on the Material Related Party Transaction as of March 31, 2020 as required by IC Letter No. 2017-29.

We hope you find everything in order.

Respectfully,

RISER C. CAUSING

VP - Head of Sales and Operations NL

PARAMOUNT LIFE & GENERAL INSURANCE CORPORATION

14th and 15th Floors, Sage House

110 V. A. Rufino Street, Legaspi Village,

Makati City

As of March 31, 2020

REPUBLIC O	F THE	PHII	IPPINES)
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Makati City) S.S.

Doc. No.

Page No.

Book No. ____/

Series of _ 20%,

I solemnly swear that all matters set forth in this report are true and correct, to the best of my knowledge and belief.

VP - Head of Sales and Operations NL

SUBSCRIBED AND SWORN TO BEFORE ME this day of JUN 2 2 2020, affiant exhibiting to me this Taxpayer's Identification No. 160 -378-469							
exhibiting to me this Taxpayer's Identification No.	160 -378-469.0	4/1/2					
		Notary Public					
		Until December 31, 20					
		PTR No					
		Place					

Commission No. M- 267
Notarial Public - Makati City
Until December 31, 2021
15th Floor, Sage House V.A. Rufino St.,
Legaspi Village, Makati City 1229
PTR No. MKT 8126253/01-08-2020/Makati City
IBP No. 104799/01-09-2020/Manila I Chapter
MCLE Compliance No. VI-0021352/4-14-2022

Roll No. 67832

Material Related Party Transaction Paramount Life & General Insurance Corporation As of March 31, 2020

Parent/Subsidiary/Affiliate	Related Counterparty	Relationship between the Parties	Transaction Date	Type of Transaction	Amount	Terms	Rationale for entering into the Transaction
A. Paramount Life & General Insurance Corporation a. Paramount Care b. DOSRI c. Others	Nil	Nil	Nil	Nil	Nil	Nil	Nil
B. Paramount Life & General Holdings Corporation a. Paramount Life & General Insurance Corp. (Subsidiary) b. Paramount Care (Subsidiary) c. Others	Nil	Nil	Nil	Nil	Nil	Nil	Nil
C. Subsidiary 2 a. Subsidiaries/Affiliates b. DOSRI c. Others	Nil	Nil	Nil	Nil	Nil	Nil	Nil
D. Affiliate 1 a. Subsidiaries/Affiliates b. DOSRI c. Others	Nil	Nil	Nil	Nil	Nil	Nil	Nil
E. Affiliate 2 a. Subsidiaries/Affiliates b. DOSRI c. Others	Nil	Nil	Nil	Nil	Nil	Nil	Nil

Please indicate in the last column (rationale for entering into the transaction) if the counterparty was a non-related party at the time when the transaction was entered into.