

**SYLVIA F. PANANGUI AND OLIVIA F. PANA-NGUI, MINORS,
REPRESENTED BY ALBERTHA FERRER, PETITIONERS, VS. THE
EMPLOYEES' COMPENSATION COMMISSION AND THE
GOVERNMENT SERVICE INSURANCE ...**

G.R. No. 56259. March 18, 1983

Ponente: MAKASIAR, J.

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MAKASIAR, J.:

This petition seeks the reversal of the December 11, 1980 decision of the Employees' Compensation Commission in ECC Case No. 1107 affirming the decision of the Government Service Insurance System denying the claim for death benefits under P.D. No. 626, as amended (pp. 5 & 16, rec.; p. 34, ECC rec.).

Petitioner Albertha V. Ferrer who represents the minors Sylvia and Olivia Panangui, is the sister of Lilia F. Panangui who died on September 8, 1976 of acute congestive heart failure, rheumatic heart disease complicated with seven-month pregnancy, premature labor, bon leakage (pp. 13 & 15, rec.; pp. 3 & 21, ECC rec.).

The records disclose that petitioner's late sister joined the government service on April 2, 1965 as clerical aide (emergency status) in the Philippine Constabulary, Office of the Judge Advocate (p. 5, rec.; p. 4, ECC rec.). At the time of her death, decedent was already a clerk in the aforementioned office assuming a permanent status since July 9, 1971 (p. 4, ECC rec.). The attending physician's certification reveals that decedent suffered from rheumatic heart disease which she contracted in 1967 (p. 13, rec.; p. 21, ECC rec.).

It appears that sometime in August, 1976 or about a month before her death on September 8, 1976 and when she was in her seventh month of pregnancy, the deceased was confined at the Constabulary Hospital in Camp Crame for three days for "threatened miscarriage." She reported back for work after such confinement. In the evening of September 7, 1976, she complained of severe abdominal pains accompanied by bloody vaginal discharge. She was brought by petitioner to the V. Luna Medical Center where, in spite of emergency treatment, she died of acute congestive heart failure and rheumatic disease (pp. 5 & 72, rec.; p. 3, ECC rec.).

On October 22, 1976, petitioner filed on behalf of decedent's two minor children, her claim with the GSIS for death benefits under P.D. No. 626, as amended. Said claim was denied on November 2, 1976 (pp. 11 & 14, rec.; pp. 22 & 6, ECC rec.).

Petitioner requested for reconsideration of aforesaid denial on August 2, 1977 (p. 15, rec.; p. 7, ECC rec.). In its letter of August 3, 1977, the GSIS upheld its previous denial of the claim (p. 9, ECC rec.).

On July 21, 1978, petitioner filed with the Ministry of Labor her second appeal for reconsideration (p. 14, ECC rec.). In its letter of August 4, 1978, the GSIS again denied reconsideration of its previous action and elevated the records of this claim to the Employees' Compensation Commission for review (p. 15, ECC rec.).

Respondent Commission, in its decision dated December 11, 1980, affirmed the denial of the claim by the GSIS.

The Commission thus ruled:

"In the instant case, it is clear that the predisposing factors responsible for the decedent's death could not be ascribed to her employment as it was her troubled pregnancy which resulted in various complications, which caused her death. The records showed that the decedent had been on sick leave due to her abnormal pregnancy, and was on bed rest at the time she suffered severe abdominal pain and bloody vaginal discharge. . . .

"Appellant's claim that the decedent's cause of death was employment-connected is therefore conjectural and bereft of medical or legal basis. No evidence could substantiate that the decedent's employment as clerk played a role in the decedent's death. As correctly pointed out by the respondent System, the decedent's pregnancy, rather than the nature of her work precipitated her heart failure. . . .

"Much as we commiserate with the appellant for the premature demise of her beloved sister, we cannot reverse the decision of the respondent System as the evidence on record disclose that the decedent's death due to congestive heart failure was principally caused by her pregnancy and not by reason of her employment" (p. 16, rec.; p. 34, ECC rec.).

Hence, this petition.

Petitioner contends that her sister was then healthy and used to be a track and field athlete during her early youth, particularly in her high school and college days (p. 20, ECC rec.) and that decedent has had rheumatic heart disease since 1967. Petitioner specifically alleges:

"As stated in the attending physician's certification (Annex B), the decedent has rheumatic heart disease since 1967. However, the records show that since the time of her employment, she was never confined of any critical ailment, much more of a heart ailment except her latest confinement in 1976 which caused her death. It was also duly proven that the decedent had three (3) normal deliveries in full term before her fourth pregnancy."

In alleging compensability of this claim under the Workmen's Compensation Act, petitioner relies on Our previous ruling in the *Marta Avendaño* case (L-48593, April 30, 1980, 97 SCRA 464) that rights accrued and vested while a statute is in force survive its repeal. Likewise, she anchors her claim for death benefits on Our pronouncement in the *Corales* case (L-44063, Feb. 27, 1979, 88 SCRA 547) that rights accrued and vested while a statute was in force ordinarily survive its repeal.

Respondent Commission, thru the Solicitor General, maintains, however, that "the cause of decedent's death, chronic congestive heart failure and rheumatic heart disease complicated by her pregnancy, had nothing to do with her employment as clerk in the office of the Constabulary Judge Advocate and, therefore, does not fall within the compensable coverage of the law" (pp. 34 & 75, rec.); that the illness which caused Mrs. Panangui's death is not an occupational disease (pp. 35 & 76, rec.); that decedent's death was due to troubled or abnormal pregnancy which caused complications like congestive heart failure and rheumatic heart disease (pp. 38 & 13, rec.); and that since said illness which caused her death occurred when P.D. No. 626 was already in effect, its provisions should be applied and not the old Workmen's Compensation Act (pp. 38 & 80, rec.).

WE find petitioner's claim meritorious.

As We have consistently and even persistently stated before in numerous cases, We have always viewed and treated compensation claims on a much broader perspective and have always resolved such claims on the basis of the fundamental and well-entrenched Constitutional precepts of social justice and protection to labor.

If only to emphasize Our position on the matter, We find it indispensable to present the harsh realities of the prevailing conditions. Thus, it is now judicially acknowledged that labor in the private agricultural, industrial and service sectors of the economy, as well as in the government service, together with their families form the vast

majority of our 50 million population. Also, it has long been recognized that labor, on confrontation with management is at once at a disadvantage for it is management which dictates the levels of income and fringe benefits due to labor. For this reason, Section 9, Article II of the New Constitution declares as a matter of principle that the State shall afford protection to labor and guarantee the rights of workers to just and humane conditions of work. To implement this principle, the State enacted and revised the Labor Code and reoriented social legislations like the GSIS law for government workers, the SSS for private workers, the Medicare law, the Employees' Compensation and State Insurance Fund and other similar laws in order to neutralize and counter-balance the disadvantageous status of labor before management.

WE are well aware that any kind of work or labor produces stresses and strains which normally result in the wear and tear of the human body. It should thus be noted that workers or employees struggle daily to board overloaded public transportation vehicles in going to work and in coming home. And if they reside in the suburbs, they travel long distances which usually take an hour or so. In many cases, they have to take two or three rides. These, alone, produce a great deal of physical strain and tension caused by the fear of tardiness and the resulting disciplinary measure, plus the anxiety for their personal safety along the way. Workers and employees go through the ordeal of the so-called "rush hour." For those who are healthy, it is deleterious to their health; for those who have ailments and weak resistance, it aggravates their illness and such ordeal exposes them to contraction of diseases. With the "rush hour" problem plus the atmospheric pollution, the heat and rains and the discomfort in public transportation particularly in overloaded buses, one can really imagine the tediousness suffered by the ordinary worker.

Then, too, while at work, the worker or employee experiences more stresses in an effort to produce the required quantity and quality of work, in meeting deadlines and worrying over his job security, the prospects of going up and higher income or worries generated by reprimands, admonitions or reminders from superiors for mistakes or oversights in the performance of his duties.

Taking all of the foregoing into consideration, We find it necessary here and now to reiterate Our traditional rule that compensation claims should be liberally interpreted in favor of labor.

In the instant case, decedent, who was a former athlete, joined the service as a strong and healthy person on April 2, 1965. She contracted rheumatic heart disease in 1967. She underwent treatment for the said heart ailment from 1970 but the same progressively worsened. She finally succumbed to acute congestive heart failure, rheumatic heart disease and troubled pregnancy.

From the report of findings by the ECC medical officer (p. 28, ECC rec.) the following definition should prove crucial:

"Congestive heart failure is a clinical syndrome which develops eventually in 50-60% of all patients with organic cardiovascular disease. It is defined as the clinical state resulting from inability of the heart to expel sufficient blood for the metabolic demands of the body. Heart failure may therefore be present when cardiac output is high, normal or low, regardless of the absolute level, the cardiac output is reduced relative to metabolic demands. The most common underlying causes of cardiac insufficiency are hypertension, coronary atherosclerosis, rheumatic heart disease (valvular diseases), congenital heart disease, syphilitic aortic insufficiency, calcific aortic stenosis, cardiomyopathies and bacterial endocarditis. Numerous arteriovenous fistula, myocarditis, beriberi, and myocardial involvement by tumors or granulomas. In 50% of cases there are demonstrable precipitating diseases or factors. The commonest of these are arrhythmias, respiratory infection, myocardial infarction, pulmonary embolism, rheumatic carditis, excessive or rapid administration of parenteral fluids, pregnancy, thyrotoxicosis, anemia, and excessive salt intake" (italics supplied).

Rheumatic heart disease is a disease resulting from rheumatic fever, marked by inflammation and disfigurement

of the heart valves. The heart valves are flap-like structures which like one-way doors, stand in the openings between the chambers of the heart. Their function is to allow the passage of blood only forward. However, when deformed by disease, they no longer form a perfect fit for the openings, and blood flows backward as well as forward during the contraction of the heart. The amount of blood which flows backward is lost to the forward stream. The heart must, therefore, work much harder to supply the body with the normal amount of blood. This, in turn, leads to other complications (p. 689, Schmidt's Attorney's Dictionary of Medicine, 1965 Ed.).

It must be noted that decedent was found physically and mentally fit for employment as of April 2, 1965 when she first entered the service. This fact is borne out by the medical records as certified to by Medical Officer LT. Col. Jovellanos of the Philippine Constabulary Medical Company (p. 11, ECC rec.). She initially worked as clerical aide on April 2, 1965 (per service record, p. 4, ECC rec.). During her employment for more than eleven (11) years, decedent was assigned in and serviced two divisions of the Philippine Constabulary. As such, she took charge of the filing of various documents, papers, laws, directives, circulars and other legal materials pertaining to military affairs; typed drafts of legal opinions and finalized the same relative to death and disability claims of PC personnel and other employment benefits; prepared the budget of the office; followed up releases of funds and prepared the payroll of civilian employees; paid said employees after cashing the checks corresponding to their pay; and made available treasury warrants to all officers and men every 15th and 30th of each month. Aside from the aforesaid functions, she still rendered overtime work for more than one year upon declaration of martial law. Decedent had to cope with the increased volume of workload caused by the sudden increase of activities and tasks of the Philippine Constabulary (per certification of the Executive Officer of the Constabulary Judge Advocate, p. 13, ECC rec.).

Evidently, therefore, decedent who was an athletic and healthy person, contracted rheumatic heart disease only in 1967 or two years after she joined the Office of the Judge Advocate, Philippine Constabulary, as clerical aide. There is no doubt that her heart ailment supervened during the course of her employment and the same was aggravated by the working conditions then prevailing. As aforesaid, she was assigned to perform numerous duties in two divisions. After declaration of martial law, she was even required to render overtime work for more than one year. At such point, decedent should have complained of her heart condition before her supervisors and should have slowed down in her work but she did not and could not because she had to keep her job. For an employee with a rheumatic heart, decedent was unjustly overworked. The progressive worsening of her heart disease is confirmed by the medical certificate of the Commanding Colonel, MC of the PC Station Hospital. The pertinent portions of said certificate are thus quoted:

"This is to certify that the late Mrs. Lilia F. Panangui, formerly a civilian employee of the Philippine Constabulary had been my patient for numerous times since 1970. I know for a fact that she actually consulted medical officers in this hospital and was confined several times for the same illness.

"When she consulted me for the first time I diagnosed her as having valvular heart disease, secondary to Rheumatic Heart Disease. The disease progressively became worse in spite of treatment so that the latter part of 1975 and in 1976 she had Congestive Heart Failure, Cardiac Decompensation due to Valvular Defect secondary to Rheumatic Heart Disease" (p. 5, ECC rec.; italics supplied).

Clearly, the cause of action thus accrued as early as 1967 when the late Lilia Panangui initially contracted rheumatic heart disease and which imperceptively progressed and affected her fourth pregnancy and which in turn precipitated the acute congestive heart failure. Consequently, such accrual of the cause of action should be reckoned as of the time when the New Labor Code had not yet taken effect.

Hence, in *Corales vs. ECC, et al.*, supra, WE ruled:

"Petitioner's claim having accrued prior to the New Labor Code, the presumption of compensability, the

principle of aggravation, the award of attorney's fees and the payment of administrative fees must be observed and applied. And the Employees' Compensation Commission as the successor of the defunct Workmen's Compensation Commission is duty bound to observe and apply the foregoing principles in passing upon worker's compensation. Moreover, as an agency of the State, the Employees' Compensation Commission, like the defunct Court of Industrial Relations and the Workmen's Compensation Commission, is under obligation at all times to give meaning and substance to the constitutional guarantees in favor of the workingmen, more specially the social justice guarantee; for otherwise, these guarantees would be merely a lot of meaningless patter (Santos vs. WCC, 75 SCRA 371 [1977])."

In reaffirmation, We declared in the recent case of Barrameda vs. ECC, et al. (L-50142, August 17, 1981, 106 SCRA 621):

"The Balatero case also brought to the fore the same objection raised in the case at bar—that the ailment of petitioner falls outside the compensable ambit of Presidential Decree No. 626 because said Decree, particularly Sec. 1, par. (c) of the Implementing Rules, covers only injury or sickness that occurred on or after January 1, 1975. WE ruled then and WE adhere to the same ruling—that the governing law in the prosecution of the cause of action which has accrued prior to the effectivity of a new law shall be the law enforced at the time of the accrual of the said action. In the Balatero case, on June 1, 1974, since the Workmen's Compensation Law was then in full force and effect, then it should be the governing law, based on the principle that 'rights accrued and vested' while a statute was in force ordinarily survives its appeal."

It should be recalled that Section 44 of the former compensation law clearly provided that in any proceeding for the enforcement of the claim for compensation, it shall be presumed, in the absence of substantial evidence to the contrary, that the claim comes within its provisions. Said section unequivocally established a presumption of compensability although disputable by substantial evidence. It then becomes the duty of respondent employer to show that the claim does not come within the coverage.

Consequently, once the basic or jurisdictional facts are prima facie established, the statutory presumptions come into operation and work into play in favor of the claimant. The burden rests on the employer to overcome them with the degree of contrary proof required by law (Batangas Trans. Co. vs. Riviera, L-7658, May 8, 1956). Likewise, it must be stressed that the function of a presumption is to dispense with the need for proof. The burden to overthrow the presumption and to disconnect, by substantial evidence the injury or sickness from the employment, is laid by the statute at the door of the employer (Magalona vs. WCC & NASSCO, L-21849, Dec. 11, 1967, 21 SCRA 1199).

It then becomes unquestionable that once the illness supervened at the time of the employment, there is a rebuttable presumption that such illness arose out of the employment or was at least aggravated by such employment. The claimant is relieved from the burden of proving causation where the illness is shown to have arisen in the course of employment (Magalona vs. WCC & NASSCO, supra, citing Justiniano vs. WCC, L-22774, Nov. 21, 1966).

Thus, too, it should be borne in mind that "aggravation" as an element of compensability was incorporated to bring Our law on workmen's compensation in conformity with the American statutes and jurisprudence which recognize the compensability of illness aggravated by the nature of employment (Quiazon & Fernandez, Labor Law Series, Vol. IV, p. 40).

Hence, in the early case of Blue Bar Coconut Co., et al. vs. BOO (L-8920, Sept. 28, 1954), We ruled that where the claimant was infected prior to his engagement by the company or subsequent thereto, or during his employment, an infection, not detected by the company or insurance physicians, if aggravated by the nature of the claimant's work, is compensable. And We even went further when We held that while there is that possibility that

factors other than the employment of the claimant may also have contributed to the aggravation of his illness, this is not a drawback to its compensability. For, under the law, it is not required that the employment be the sole factor in the growth, development or acceleration of claimant's illness to entitle him to the benefits provided for. It is enough that his employment had contributed, even if in a small degree, to the development of the disease. It has been repeatedly held that under the Workmen's Compensation Law, it is not necessary for a claimant to carry the burden of proof to establish his case to the point of demonstration. It is sufficient to show that the hypothesis on which he bases his claim is probable (*Abaña, et al. vs. Quisumbing*, L-23489, March 27, 1968, citing *MRR vs. WCC, et al.*, 72 SCRA 260).

And in the later case of *Vda. de Laron vs. WCC, et al.* (L-43344, Sept. 29, 1976), We declared that there is a presumption of compensability where working conditions contributed to the general weakening of bodily condition of the employee and lessening of his resistance to the growth of the malignancy.

And finally, in the following recent cases, We reiterated thus:

"In any case, whether his claim was based on the first illness in 1959 or the last hospitalization in 1973, it is not disputed that his illness supervened in the course of employment and the same was never controverted by his employer. Hence, under the Workmen's Compensation Act, petitioner is freed from the burden of proving that his illness or injury was caused or aggravated by the nature of his work. In fact, the cause of his ailment is immaterial; what is important is that it occurred or was aggravated in the course of employment and disabled the workman from pursuing his ordinary occupation (*G.B. Francisco, Inc. vs. Workmen's Compensation Commission*, 87 SCRA 23, 30). The presumption of compensability had already set in . . . 'Because once an illness, subject matter of a compensation claim is shown to have supervened in the course of employment, there arises in favor of the claimant the rebuttable presumption that the said illness either arose out of or at least was aggravated by, the nature of claimant's employment; and consequently, the burden to show by substantial evidence the contrary lies with the employer. And the ultimate result of that principle is that the presumption, rebuttable at its inception, becomes conclusive upon the failure of the respondent employer to destroy the same' (*Enriquez vs. Workmen's Compensation Commission, et al.*, GR No. L-42640, Sept. 28, 1979)" [*Cañeja vs. ECC, et al.*, L-46992; March 31, 1980, 96 SCRA 896, 897].

"It is undisputed that the deceased contracted his ailment during his employment as epidemiological aide of respondent employer. Accordingly, petitioners have in their favor the disputable presumption that when the illness supervenes during employment, it is to be presumed that the sickness either arose out of, or was at least aggravated by the nature or conditions of his work and is compensable. With this presumption, the burden of proof shifts to the employer and the employee is relieved of the burden to show causation. To the employer then is shifted the burden of proof to establish compensability. In the present case, respondent employer has failed to overthrow by substantial evidence the statutory presumption" (*Villason vs. Republic of the Philippines*, L-47075, April 8, 1981, 104 SCRA 102).

Significantly, decedent's employer which is the Judge Advocate General, Philippine Constabulary, never opposed nor questioned this claim. On the contrary, said office has always been supportive of petitioner's claim by supplying the needed information confirming the fact that decedent performed numerous duties in two divisions and that she had to render overtime work for more than a year. Instead of controverting this claim, her employer's attestation clothed it with conclusive presumption of compensability.

It must also be noted that the medical head of the Constabulary Station Hospital attested to the fact that decedent had been treated for valvular heart disease since 1970 and that such heart disease progressively worsened in spite of said treatment. His medical certificate, as against the medical report of respondent GSIS, should be given more credence since the same was issued by the army doctor who directly and personally attended to her from 1970 to 1976. And as We have stated in the case of *Marte vs. ECC* (L-46362, March 31, 1980), as against the reports of

petitioner's attending physician, respondent GSIS had not produced any concrete evidence to support its allegations. It merely relied on the evaluation of its medical officer which is not based on first-hand or personal examination of petitioner.

It appears that decedent (per account of her sister-petitioner) had three previous normal childbirths despite her rheumatic heart disease and her work and domestic conditions. She was obviously the breadwinner of the family since her alleged husband was not around nor was he involved during the critical events leading to her death. Normally, he would have directly or personally attended to his wife's hospitalization. It was the petitioner who attended to her late sister. Even after her death, their children have been cared for by decedent's family. The alleged husband seemed to be unconcerned; otherwise, he should have been the proper claimant in this case. It may thus be suspected, even presumed, that something was wrong in their relationship. This serious domestic problem added to the fact that decedent had to carry on in spite of her disabling ailment in order to survive, heavily taxed her already weakened heart. She even had to walk a kilometer to and from Camp Crame just so she could save the measly fare money for her more urgent needs.

Clearly, therefore, rheumatic heart disease which decedent contracted during her employment and which gradually weakened her heart due to the pressure of her working conditions was the real and proximate cause of her death. Had it not been for such heart disease, she would have had a normal pregnancy. And pregnancy in women with underlying heart disease has been medically found as a precipitating cause of heart failure. WE quote thus:

"Thyrotoxicosis and pregnancy— Like anemia, these conditions require an increased cardiac output. The development or intensification of heart failure may actually be one of the first clinical manifestations of hyperthyroidism in a patient with underlying heart disease. Similarly, heart failure not infrequently occurs for the first time during pregnancy in women with rheumatic valvular disease; in such women the condition of the heart may remain normally compensated for many years following delivery, after the excessive burden has been eliminated (p. 1117, Harrison's Principles of Internal Medicine, Seventh Ed., italics supplied).

Significantly, American courts have declared compensability of claims based on work-connected heart diseases resulting in death. Thus:

"It is generally recognized that a heart attack of heart injury Colo.—Black Forest Fox Ranch v. Garrett, 134 P. 2d. 332, 110 Colo. 323 such as coronary thrombosis, Idaho.— In re Cain, 133 P. 2d 723, 64 Idaho 389—Aranguena v. Triumph Mining Co., 126 P 2d 17, 63 Idaho 769, acute dilation of the heart, Ill.—Fittro v. Industrial Commission, 37 N.E. 2d 161, 377 532, or some other injury to the heart, such as Myocarditis, N.Y.—Seebold v. Inaker Ridge Fuel & Supply Corp. 103 N.Y. 2d 37, 278 App. Din. 730, Or coronary occlusion, which results in disability or death may be compensable as an accident or accidental injury where it was due to unusual or extraordinary conditions in the employment, or was due to overexertion or excessive strain in performing the duties of the employment; and the test to determine whether compensation may be awarded in such situations is whether the unusual exertion or excessive strain precipitated the death or disability so as to bring it about at a time when it would not have occurred normally. Minn.—Frholtz v. Balkan Min. Co., O N.W. 2d 863, 245 Minn. 73.

"Compensation may be awarded where the immediate precipitating cause of an employee's death or disability is a heart attack due to exertion in the performance of the duties of the employment, even though the attack was delayed for a time and did not occur until after the exertion had come to an end; Ga.—Maddox v. Buice Transfer & Storage Co., 59 S.E. 2d 329, 81 Ga. App. 503, and if the exertion or strain in the employment was sufficient to cause the heart attack, it is not necessary that the result of the exertion or strain, that is, the disability or death, develop at the time, or scene of the employment, La—Krasmer v. Jahncke Services, App., 83 So. 2d 916.

"Nevertheless, where a reasonably prudent employee innocently aggravates the harmful effects of the original injury, the original cause is not interrupted but is held to accomplish the final result; N.J.—Hartman v. Federal Shipbuilding & Drydock Co. 78 A. 2d 846, 11 N.J. Super. 611, in fact it has been held under some of the statutes that compensation should be allowed in these circumstances regardless of the employee's imprudence, Wash.—Anderson v. Industrial Ins. Commission of Washington, 199 P. 747, 116 Wash. 421.

"Acceleration of a diseased bodily condition to the point where it constitutes a personal injury by reason of strain or exertion of the employment, constitutes an injury arising out of the employment. Ark.—Sturgis Bros. v. Mays, 188 S.W. 2d, 208 Ark. 1017. Death or disability arises out of the employment where it results from the exertion involved in his employment operating on his diseased or weakened condition, Ariz.—Jones v. Industrial Commission, 306 P. 2d 277, 81 Ariz. 352, without regard to the degree of exertion or the condition of the employee's health, Ga.—Globe Indem. Co. v. Simonton, 76 S.E. 2d 837, 88 Ga. App. 694, 76 S.E. 2d 830, 88 Ga. App. 648" (99 C.J.S. 184; 205-206, 212, italics supplied).

Social justice commands the allowance of legitimate and just claims of government workers especially like the decedent who was a lowly, exploited and struggling employee who also contributed to the GSIS funds.

IN VIEW OF THE FOREGOING, THE DECISION OF RESPONDENT EMPLOYEES' COMPENSATION COMMISSION IS HEREBY SET ASIDE AND THE PHILIPPINE CONSTABULARY IS HEREBY DIRECTED

- TO PAY HEREIN PETITIONER, IN REPRESENTATION OF THE TWO MINOR CHILDREN, THE SUM OF SIX THOUSAND (P6,000.00) PESOS AS DEATH BENEFITS;
- TO REFUND PETITIONER'S MEDICAL AND HOSPITAL EXPENSES DULY SUPPORTED BY PROPER RECEIPTS; AND
- TO PAY PETITIONER BURIAL BENEFITS IN THE AMOUNT OF TWO HUNDRED (P200.00) PESOS.

SO ORDERED.

Concepcion Jr., Guerrero, Abad Santos, De Castro, and Escolin, JJ., concur.
Aquino, J., is on leave.

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