

BELIVERY DUE DATE: 12/11/22

Procurement Unit Toloriax No.: 045-982-4630

WHITE PROPERTIAN ACCOMES ASSESSMEN Supplier:

PATIENT CORPORED IN YOR HORIZON

Work Order No.: 2022-184

Address:

Room 308. Timstate Building, \$438 South Super History

Date: 11/4/2022

TIN:

Renotal, Makett City

2022-186

Tel. No.:

004-654-004-000 VAT Reg.

10 No. : Date:

9/21/2022

0916-214-8323/(02)8893-8382

Mode of Procures

net Small Yalue

Made of Paramet

MAA

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty [30] calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QIV.	UNIT	DESCRIPTION		UNITORT	TOTAL COST
	lot	INSURANCE SERVICES POR STUDENTS BURG \$1, 2021 - 2021	AND FOR THE	501,701.00	SCI.Zel.an
		ler 22,005 officially septimis students			
		Schools of historical Brandley - 37-2022-2023			
		Accidental Death/Obsoblement	- Ps 100,000		
		Unpreceded Murder and Assessit Total Pertubusant Disability	- 100,000 - 100,000		
		Burisi Dennitt (excidental death)			
		Medical Paperson Substantian and Escalit (actions care)	- 25,000 (par type of scrident)		
n Sallaktingkes		Separate costs autocores for Natural Desils	· 25,900		
		Separate cosh are trace for Material Death trached by SARS/COVID-15	- 16,000		
		Hisspital and modical expense reinstruveness benefit due	- 10,000 (Per type		
		[2] N. 10 (1984) N. S. 10 (1984) N. 10 (1984)	of accident)		
		Daily Cash Allewanca (60 days max accident configurator)	- 450/ day		
		Dailly Canh Allowance (60 days must-elektrons combinement	- 450/day (not		
		Daily Hospital Income Bunells for the first 10 days of ICU	- 450/dag-(net		
		confinentation (date to admittent in addition to regular daily costs allowance of Pa 406/day)	Company Company		
	6 ₀ at	Ambulance Survice Assistance with receipt (due to accident)	. 1,580 (one term out?)	COMMISSION	
		(Please read capability at the bac		RAF C P	NOV 11 2022

Charge to:

ROA No. : 61 - sandfil - sars - 11 - [435] CONFORME & RECEIVE COPY :

RUTH C. DARM - Managing Director

Wovember 17, 2022

Bank Account Name: <u>UPRAISE, INC</u>

1431-0118-55 Bank Account Number:

Bank Name: BPI

Bank Address BPT-LEGASPI-GAMBOA BRANCH, Makati City

Form No. Tall PROJECT () (Barrison No. 0).

Authorized Official

FURDS AVAILABLE

Page 1 of 5



DEL CHERY DUE DATE:

Procurement Unit

Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EXPLATION REPRAISE AGENTY INC.

Work Order No.: 2022-184

Address:

Supplier:

Room 308, Timestate Building, \$438 South Super Highway.

Banekal Makati City

Date: 11/4/2022

TIN:

004-654-004-000 VAT Rest

2022-186

Tel. No.:

0916-214-8333/(02)8893-8382

Date: 9/21/2022

10 No.:

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the "TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
		Designs and Typhoid fever cash assistance subject to actual medical expenses (in addition to Daily Cash Allowance Benefit due to Sickness - one time only)	- Pa 2,000 per student		
		Emergency Cash Assistance Benefit (due to fire and earthquile - student cuty)	- 2,500 [one time only)	100 mg 100 m 100 mg 100 mg	en e
		CGI. (Comprehensive General Liability - Combined single Limit) (property damage & Bodily injury: within the school premises operations)	- 250.000 (aggragate limit)		
		Common Carrier (decide Indemnity) Parent/Guardian Extended Coverage - Parent of the Insured Student or selectors is the surviving designment guardian, below 50 years old, free from any congenital and serious physical Studentones, is covered in case of	· covered · covered (P=30,000)		
		accidental death & disablement. Tuttion Fee/Hiscottssous Fees Reland -Accidental Death Case of Students) (maximum of 10 students to a year)	- 5,000 per stedent		
		Amusel President Per Stadent - Ps 22.0 Other Festions:			
		 24 hours a day anywhere in the world scheduler at home or it whole year. It also includes drawning, day and smale bites and bites, , lightning, earthquake, tidal waves, volcanic eruptions, and landslides, and other accidents caused by natural calumit 	f all forms of animal typhoon, tomadoes,	commission	ο <mark>γ</mark> ίαυπ-180
	1			4-14-1	Piven

Charge to:

ROANO: Strong - MY " Its CONFORME & RECEIVE COPY: /

Mayor RM - Managing Director

November 17 2022

UNIFIED PROPERTY AND A

Bank Account Name: UPRAISE, INC. Bank Account Number: 1431-0118-55

Bank Name: BP I

RPI-LEGASPI-GAMBOA BRANCH, Makati City

Form No.: USUS-PRO-SE LO Reviern No.: 01

President for Administration

Authorized Official G

OR GRACE N. ROSETE

ASPERIAL YAUDER, CPA

Badget Officer

FUNDS AVAILABLE:



DELIVERY BUE DATE:

Telefax No.: 045-987-4630

UNIFIED PROPERTY AND ACCIDENT INSIDANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC

Work Order No.: 2022-184

Address:

Supplier:

Room 308, Timstate Building, 5438 South Super Highway,

Rangkal Maked City

11/4/2022

TIN: Tel. No. : 004-654-004-000 VAT Rest.

2022-186

0916-214-8333/(02)8893-83R2

Mode of Procurement: Small Value

9/21/2022

Mode of Payment

Date:

10 No. :

Date:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
		 in and out of school attending regular classes or participating in other school activities 		
		While attending classes and on days when school is in session including lunch and recess periods.		
		While traveling to and from a school; attending extracurricular activity after school hours or on days when school is not to session.		
		 While participating is a school sponsored and supervised athletics activities during or after regular school hours, on or off school premises. 		İ
		 While travelling in public or private conveyance used for air, land and sea travel and; 		
		While travelling as a fare-paying passenger on any commercial scheduled, non-scheduled special or chartered flights.	Andrew Control	
		While attending OJT in any part of the world.		100 E 10
		 With Motorcycle Coverage-whether a passangers/operator/pillion of any 2.3, Or 4 vehecled motorized vehicles. 		
		 Proc Coverage for Permanent and Full Time Faculty and Hon-Teaching Staff (excluding bred Security Guards from an Agency) same as the student's plan/benefits, provided 100% of the exculled students will be insured. Members of the Board of Trustees (up to 70 years old will also be covered for 50% of the students' benefits 	ng light	
		Coverage Extensions: Accidents caused by Acts of Nature, Accidental Pood Possoning, Accidental Drowning, and All forms of Animal bites.		4
		 Period of Coverage-One Year (from the date of action to proceed the impance of the Policy) 	RF.	SEIVED
	<u> </u>	(Please read carefully at the back hereof)	- hr <u>2 1</u> 1	11-11-11 1 1 202

ROANG: 65-36 AL MISS-1- FCK CONFORME & RECEIVE COPY: Q

RUTH C. DARM - Managing Director

INIPIZO PROPERTY AND ACCURANT

Firm/Dealer/Supplier/Contractor November 11, 2022

Date

Bank Account Name: UPRAISE, Inc.

Bank Account Number: 1431-0118-55 Bank Name: BPI

Bank Address BPI-LEGASPI-GAMBOA BRANCH, Makati City

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE

Budget Officer

APHROVED

DEC GRACE N. ROSETE

resident for Administration d 085-al/

Effectivity Date: March 01, 2017



Telefiox No.: 045-982-4630

UNITED PROPERTY AND ARRIVERS INSTRUCTION Supplier:

STATEM FOR PUBLICATION (HPRAISE) AGENCY INC

Work Order No.: 2022-184

Address :

Room 308, Timstate Building, 5438 South Super Highway.

Banekal, Makati City

Date: 11/4/2022

TIN:

004-654-004-000 VAT Reg.

2022-186

Tel. No.:

0916-214-8333/(02)8893-8382

Date :

9/21/2022

SIR/MADAM:

Mode of Procurement: Small Value Mode of Payment:

IO No. 1

8/30

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION	1	UNIT COST	TOTAL COS
		 Accidental Death or Permanent Disablement-pays who the following locuse within 186 days from the date of so 	en hyjory results any of culset		
			% of Principal Sum		
		1. Loss of life	100%		
	1	2. Loss of two limbs	100%	page 1 Section	
	1	3. Loss of both hands, or all fingers	inter i	97 97	
		4. Loss of both feet	100%	gran.	
	1	5. Total loss of sight of both eyes	100%		
		6. Injuries resulting in being permanently bedridden	100%		
	1	7. Any other injury causing permanent total disablemen	t 1004		
		8. Lower of arrest at also we military	70%		
47		9. Loss of arm between elbow and wrist	50%		
	1	10. Loss of hand	50%		
		11. Loss of four fragers and thumb of one hand	42.50%		
		12. Lone four lingur	35%		
		13. Long of thumb	15%		
		14. Loss of indexfinger	10%		
		15. Loss of middle Roger			erent
		16. Loss of ring fingur	5%	**********	122252
•		17. Loss of little finger	5%	7.7.7.2.0V	
		18. Loss of metacarpain - first or second (additional)	3%	PECE	[' V F , D

Charge to:

ROANO, IF MAY 200 . 1 - B'E

CONFORME & RECEIVE COPY:

UNIDED PROPERTY AND ACCOUNTY I

November 1911/2022

Bank Account Name: UPRAISE, Inc.

Bank Account Number: 1431-0118-55

RPI-LEGASPI-GAMBOA BRANCH, Makati City

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE:

DA. GRACE N. ROSETE Vice/President for Administration



Procurement Unit Telefax No.: 045-982-4630 DELIVERY DIE DATE

UNITED PROPERTY AND A CODE OF RISIRANCE

SISTEM FOR SHIEATHON TOPRAISE AGENCY INC

Work Order No.: 2022-184

Address :

Supplier:

Room 308, Timistate Building, \$438 South Super Highway,

11/4/2022

TIN-

Banekal, Makati City

004-654-004-000 VAT Reg.

IO No. : Date :

2022-186

Tel. No.:

0916-214-8333//02\8893-8382

Mode of Procurement: Small Value

Date:

9/21/2022

Hode of Payment

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION	/ Unit cost	TOTAL COST
		19. Loss of leg at above knoe 50%		
	1	20 Law of hig below knee 40%		
1		21. Loss of toes all of one foot 15%		
		22. Loss of big toe 5%		
		23. Loss of any toe other than hig toe, each 146		
		24. Lose of sight of one eye Sos		
L	and the second	25. Loss of hearing-one-ent 50%		
		NUTE: The Insurance Company to be assigned by UPRAISS, Inc. has no accredited inspitals in Tariac City. However, since this is a reimbursement type of insurance Plan/Program, all the smrolled students of Tariac State Unionsity who will be insured through UPRAISE. Inc. can go to any Hospitals available to the Province of Tariac, for consultation, treatment and confinements, due to a particular accident or alchness/Ulness. All valid medic expanses incurred can be filled for reimbursement. * Revial Remail:/Smarato/Posh Assistance for Noticeal Desch and Macaine. Confinements due to sickness/Bases will be subject to pre-cristics. conditions/accessors. (For Taxably and Staff only).		
			30%	N'
			RECE	['V.F.D
	1	Officers and excelsion desired by the best beautiful.	III Owie	NOV-1-1, 2022

Please read excellent at the back has

Charge to:

ROANO: 64- sector-year-g-25

CONFORME & RECEIVE COPY:

RUTH C. DARM - Managing Director

Firm/Dealer/Supplier/Contractor November 11, 2022

Bank Account Name: <u>UPRAISE</u>, Inc.

Bank Account Number: 1431-0118-55

Bank Address: BPI-LEGASPI-GAMBOA BRANCH. Makati City

APHROVED:

FUNDS AVAILABLE:

OR GRACE N. ROSETE

Vice fresidenyfter filministration

iasp**erac**tauder cpa

Budget Officer

Authorized Official C

Effectively Date: March 01, 3017

Page 5 of 5

Form No.: TSU-PRO-SF 10 Revision No.: 01



DELIVERY DUE DATE:

Procurement Unit

Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Work Order No.: 2022-184

Address:

Supplier:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/4/2022

TIN: Tel. No.: 004-654-004-000 VAT Reg.

Bangkal, Makati City

JO No.:

2022-186

0916-214-8333/(02)8893-8382

Date:

9/21/2022

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards

and the Preside	nt of the Ag	gency			
QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
1	lot	INSURANCE SERVICES FOR STUDENTS ENRO S.Y. 2022-2023	LLED FOR THE	501,701.00	501,701.00
		for 22,805 officially enrolled students Schedule of Insurance Benefits - SY 2022-2023			
		Accidental Death/Disablement	- Ps 100,000		
		Unprovoked Murder and Assault	- 100,000		
		Total Permanent Disability	- 100,000		
-		Burial Benefit (accidental death)	- 25,000		
		Medical Expenses Reimbursement Benefit (accident case)	- 25,000 (per type of accident)		
		Separate cash assistance for Natural Death	- 25,000	1	
		Separate cash assistance for Natural Death including SARS/COVID-19	- 10,000	in the second	
		Hospital and medical expense reimbursement benefit due to SARS/COVID-19	- 10,000 (Per type of accident)		
		Daily Cash Allowance (60 days max accident confinement)	- 450/day		
		Daily Cash Allowance (60 days maxsickness confinement including COVID-19)	- 450/day (not congenital)		- 1-
		Daily Hospital Income Benefit for the first 10 days of ICU confinement (due to accident in addition to regular daily cash allowance of Ps 400/day)	- 450/day (not congenital)	DEMMISSION ON AUT	urtsh SD
		Ambulance Service Assistance with receipt (due to accident)	- 1,500 (one time only)	Gere NOV 1	2622

(Please read carefully at the back hereof)

Charge to:

ROA No.: 02 20441- 2027 - 11 -15K

CONFORME & RECEIVE COPY:

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Firm/Dealer/Supplier/Contractor

Bank Account Name: ___

Bank Account Number:

Bank Name:

Bank Address:

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABL

A. YAUDER, CPA

Budget Officer

APPROVED:

DR. GRACE N. ROSETE

Vice President for Administration

Authorized Official

Effectivity Date: March 01, 2017

Page 1 of 5



DELIVERY DUE DATE:

Procurement	Unit
-------------	------

Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

Supplier: SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC. Work Order No.: 2022-184

Address:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/4/2022

TIN: Tel. No.:

004-654-004-000 VAT Reg.

[O No.:

2022-186

0916-214-8333/(02)8893-8382

Bangkal, Makati City

Date:

9/21/2022

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
		Dengue and Typhoid fever cash assistance subject to actual medical expenses (in addition to Daily Cash Allowance Benefit due to Sickness - one time only)	- Ps 2,000 per student		
		Emergency Cash Assistance Benefit (due to fire and earthquake - student only)	- 2,500 (one time only)		
		CGL (Comprehensive General Liability - Combined single Limit) (property damage & Bodily injury-within the school premises operations)	- 250,000 (aggregate limit)		
		Common Carrier (double Indemnity)	- covered		
		Parent/Guardian Extended Coverage - Parent of the Insured Student or whoever is the surviving designated guardian, below 60 years old, free from any congenital and serious physical impairment, is covered in case of accidental death & disablement.	- covered (Ps 30,000)		
		Tuition Fee/Miscellaneous Fees Refund -Accidental Death Case of Students) (maximum of 10 students in a year)	- 5,000 per student		
		Annual Premium Per Student - Ps 22.0 Other Features: 24 hours a day anywhere in the world whether at home or in whole year. It also includes drowning, dog and snake bites an bites, , lightning, earthquake, tidal waves, volcanic eruptions, and landslides, and other accidents caused by natural calamit	in the school for one d all forms of animal typhoon, tornadoes,	the two was to a 1 a	т. ISU 5, D 19 <u>19-22</u>

(Please read carefully at the back hereof)

Charge to:

ROA No.: 02-20441-2027-11-1515

CONFORME & RECEIVE COPY:

<u>UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.</u>

Firm/Dealer/Supplier/Contractor

Date

Bank Account Name:

Bank Account Number: _____

Bank Name:

Bank Address:

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE

JASPER A. YAUDER, CPA

Budget Officer

APPROVED:

Effectivity Date: March 01, 2017

GRACE N. ROSETE

Vice President for Administration

Authorized Official

Page 2 of 5



DELIVERY DUE DATE:

Procurement Unit

Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

Supplier: SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC. Work Order No.: 2022-184

Address:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/4/2022

Bangkal, Makati City

10 No. :

TIN:

004-654-004-000 VAT Reg.

Date:

2022-186

Tel. No.:

0916-214-8333/(02)8893-8382

9/21/2022 Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
		In and out of school attending regular classes or participating in other school activities		
		While attending classes and on days when school is in session including lunch and recess periods.		
		 While traveling to and from a school; attending extracurricular activity after school hours or on days when school is not in session. 		
		While participating in a school sponsored and supervised athletics activities during or after regular school hours, on or off school premises. While travelling in public or private conveyance used for air, land and sea travel and;		
		While travelling as a fare-paying passenger on any commercial scheduled, non-scheduled special or chartered flights.		
		While attending OJT in any part of the world.		
		With Motorcycle Coverage-whether a passengers/operator/pillion of any 2,3, Or 4 wheeled motorized vehicles.		
		Free Coverage for Permanent and Full Time Faculty and Non-Teaching Staff (excluding hired Security Guards from an Agency) same as the student's plan/benefits, provided 100% of the enrolled students will be insured. Members of the Board of Trustees (up to 70 years old will also be covered for 50% of the students' benefits		
		Coverage Extensions: Accidents caused by Acts of Nature, Accidental Food Poisoning, Accidental Drowning, and All forms of Animal bites	COMMISSION ON	Com. TSJ
		• Period of Coverage-One Year (from the date of notice to proceed the issuance of the Policy)	F SEL CE	F. D 1 2022

(Please read carefully at the back hereof)

Charge to:

ROA No.: 02-20441 - 2022 - 11-15/5

CONFORME & RECEIVE COPY:

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Firm/Dealer/Supplier/Contractor

Date

Bank Account Name: _

Bank Account Number: _____

Bank Name:

Bank Address:

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE

A. YAUDER, CPA

Budget Officer

APPROVED:

DR. GRACE N. ROSETE

Vice President for Administration

Authorized Official

Effectivity Date: March 01, 2017

Page 3 of 5



DELIVERY DUE DATE:

Procurement	Unit
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Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

Supplier: SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC. Work Order No.: 2022-184

Address:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/4/2022

Bangkal, Makati City

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004-654-004-000 VAT Reg.

Date:

9/21/2022

Tel. No.:

0916-214-8333/(02)8893-8382

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

and the President of the Agency						
QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST	
		Accidental Death or Permanent Disablement-pays when it the following losses within 180 days from the date of accid				
			% of Principal Sum			
		1. Loss of life	100%			
	e	2. Loss of two limbs	100%			
		3. Loss of both hands, or all fingers	100%			
		4. Loss of both feet	100%			
		5. Total loss of sight of both eyes	100%			
		6. Injuries resulting in being permanently bedridden	100%			
		7. Any other injury causing permanent total disablement	100%			
		8. Loss of arm at above elbow	70%			
		9. Loss of arm between elbow and wrist	50%			
		10. Loss of hand	50%			
		11. Loss of four fingers and thumb of one hand	42.50%			
		12. Loss four finger	35%			
		13. Loss of thumb	15%			
		14. Loss of index finger	10%			
		15. Loss of middle finger	6%	COMMISSION ON	COM. TSM	
		16. Loss of ring finger	5%	RECEI	/FD	
		17. Loss of little finger	5%	t. Pare NOV	14,2022	
		18. Loss of metacarpals - first or second (additional)	3%	The second second	INMILL	

(Please read carefully at the back hereof)

Charge to:

ROA No.: 62 · 20441 - 2022 - 11-1515

CONFORME & RECEIVE COPY:

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Firm/Dealer/Supplier/Contractor

Date

Bank Account Name: _

Bank Account Number:

Bank Name: Bank Address:

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE:

IASPEB A. YAUDER, CPA

Budget Officer

APPROVED:

Effectivity Date: March 01, 2017

DR. GRACE N. ROSETE

Vice President for Administration

Authorized Official

Page 4 of 5



DELIVERY DUE DATE:

Procurement Unit

Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Work Order No.: 2022-184

Address:

Supplier:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/4/2022

Bangkal, Makati City

10 No.:

2022-186

TIN:

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9/21/2022

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0916-214-8333/(02)8893-8382

Mode of Payment:

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SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within Thirty (30) calendar days upon receipt of the Work Order as per quotation submitted by you duly approved by the TSU Committee on Bids and Awards and the President of the Agency

QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
p.h.		19. Loss of leg at above knee	60%		
		20. Loss of leg below knee	40%		
		21. Loss of toes-all of one foot	15%		
		22. Loss of big toe	5%		
		23. Loss of any toe other than big toe, each	1%		}
		24. Lose of sight of one eye	50%		
		25. Loss of hearing-one ear	50%		
		NOTE: The Insurance Company to be assigned by UPRAISE, Inc. has no accredited hospitals in Tarlac City. However, since this is a reimbursement type of Insurance Plan/Program, all the enrolled students of Tarlac State University who will be Insured through UPRAISE, Inc., can go to any Hospitals available in the Province of Tarlac, for consultation, treatment and confinements, due to a particular accident or sickness/illness. All valld medical expenses incurred can be filed for reimbursement.			
		Burial Benefit/Separate Cash Assistance for Natural Death and Hospital onfinements due to sicknesvillness will be subject to pre-existing onditions/erovisions-(For Faculty and Stoff only).			
		******************	**********	COMMISSION ON A	TOT FOLL
			, vs.a.	RECEN	5 P 2022

(Please read carefully at the back hereof)

Charge to:

ROA No.: 02 - 20441 - 2072 11 - 1645

CONFORME & RECEIVE COPY:

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Firm/Dealer/Supplier/Contractor

Date

Bank Account Name: _

Bank Account Number:

Bank Name:

Bank Address:

Form No.: TSU-PRO-SF 10 Revision No.: 01

FUNDS AVAILABLE

YAUDER, CPA

Budget Officer

APPROVED:

DR. GRACE N. ROSETE

Vice President for Administration

Authorized Official

Effectivity Date: March 01, 2017

Page 5 of 5