

DELIVERY DUE BATE: 1/9 2022

Procurement Unit Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Work Order No.: 2021-109

Address:

Supplier:

Room 308, Timstate Building, 5438 South Super Highway,

Bangkai Makati City

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

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

Date:

11/25/2021

10 No.:

2021-125

Date:

10/22/2021

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 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
1	lot	ACCIDENT GROUP INSURANCE FOR STUDENT FOR THE S.Y. 2021-2022	TS ENROLLED	384,552.00	384.552.00
		for 21,364 officially enrolled students Schodule of insurance Benefits - SY 2021-2022 Accidental Death/Disablement Unprovoked Murder and Assault Total Permanent Disability	-P=75,000 - 75,000 - 75,000		
		Burial Benefit (accidental death)  Medical Expenses Reimbursement Benefit (accident case)	- 20,000 - 20,000 (per type of accident)		
		Separate cash assistance for Natural Death Separate cash assistance for Natural Death due to COVID- 19	20,000 - 12,000		
		Daily Cash Allowance (60 days max accident confinement)	- 400day		
		Daily Cash Allowance (50 days maxsickness confinement including COVID-19)	<ul> <li>400/day (not congenital)</li> </ul>		
		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)	- 400/day (not congenital)	170天现代的建筑建	ION ON AUDIT. I
		Ambalance Service Assistance with receipt (due to accident)	- 1,500 (one time only)	RE	FARED

(Please read carefully at the back hereof)

Charge to: ROA No.:

CONFORME & RECEIVE COPY:

Baron

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE Firm/Deoler/Supplier/Contractor

December 10, 2021

Date

Bank Account Name: UPRAISE, Inc.

Rank Account Number: 1431-0118-55

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

Bank Name: BPT

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

Effectivity Oute-March 01, 2017

APPROVED:

FUNDS AVAILABLE:

OIC. B

RYAN R. RONDUILLO

DR. ARMEE N. ROSEL

VP. Research and Extension Services

of Office

Page 1 of 5

mater 1



Supplier:

TIN:

Tel. No.:

### WORK ORDER

DELIVERY DUE DATE: 1 9 /2022

Work Order No.: 2021-109

Procurement Unit Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Room 308, Tirestate Building, 5438 South Super Highway. Address: Bangkal, Makati City

Date:

11/25/2021

004-654-004-000 VAT Reg.

10 No.:

2021-125

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

Date:

10/22/2021

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 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

QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
		Emergency Cash Assistance Benefit (due to fire and earthquake)  CGL (Comprehensive General Liability - Combined single Limit) (property damage & Bodily injury-within the school gremises operations)  Common Carrier (double Indemnity)	- 2,500 (one time only) - 250,000 (aggregate limit) - covered		
		Parent/Guardian Extended Coverage - Parent of the insured Student or whoever is the surviving designated guardism, below 60 years old, free from any congenital and serious physical impairment, is covered in case of accidental death & disablement.			
		Dengue Cash Assistance Subject to actual medical expenses) (in addition to Dasiy Cash Allowance Benefit due to Sickness-one time only)	- Ps 1,200 per student		
		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 18.  Other Features:  - 24 hours a day onywhere in the world whether at home or whole year. It also includes drowning, dog and snake bites a bites. lightning, earthquake, tidal waves, volcanic eruptions and tandslides, and other accidents caused by natural calam	in the school for one and all forms of animal s, typhoon, tornadoes		CAPPE

(Please read carefully at the

Charge to:

ROA No.

CONFORME & RECEIVE COPY:

MS. RUTH C. DARM - Managing Director
UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION CUPRAISE

December 10, 2021

Sank Account Name: UPRAISE, Inc.

Hank Account Number: 1431-0118-55

Bank Address

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

BPI-LEGASPI-GAMBOA BRANCH, Makati City

APPROVED:

DR. ARMEE'N, ROSEL

RYAN R. RONQUILLO OIC, Budget office

FUNDS AVAILABLE:

VF, Research and Extension S

Authorized Official

E.



Supplier:

Address:

### WORK ORDER

DELIVERY DUE DATE: 1/9/2022

Procurement Unit Telefus No: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Boom 308, Timstate Building, 5438 South Super Highway,

Bangkal, Makati City

004-654-004-000 VAT Reg. TIN:

0916-214-8333/(02)8893-8382 Tel. No.:

Work Order No.: 2021-109

Date:

11/25/2021

IO No.:

2021-125

Date:

10/22/2021

Mode of Procurement: Smull Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 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

the President of the A	DESCRIPTION	UNIT COST	TOTAL COST
QTY. UNIT	<ul> <li>In and out of school attending regular closures or participating in other school activities</li> <li>While attending classes and on days when school is in session including lunch and receas periods.</li> <li>While traveling to and from a school; attending extracerricular activity after school hours or on days when school is not in session.</li> <li>While participating in a school sponsored and supervised athletics activities during or after regular school hours, on or off school premises.</li> <li>While travelling in public or private conveyance used for air, land and sea travel and;</li> <li>While travelling as a fare-paying passenger on any commercial scheduled, non-scheduled special or chartered flights.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>While attending OfT to any part of the world.</li> <li>Free Coverage for Personnent and roll Time Faculty and Non-Teaching Staff (excluding hirod Security Courts from an Agency) same as the student's plan/benefits, provided 100% of the enrolled students will be insured.</li> <li>Nembers of the Sourd of Trustees (up to 70 years old will also be covered for SO% of the students' benefits</li> <li>Coverage Extensions: Accidents caused by Acts of Nature, Accidental Food Poisoning, Accidental Drowning, and All forms of Animal bites</li> <li>Period of Coverage-One Year (from the date of notice to proved the issuance of the Policy)</li> </ul>		MASSION ON AUDIT TS RECEIVED

(Please read carefully at the back hereof)

Charge to:

CONFORME & RECEIVE COPY:

UNIFIED PROPERTY AND ACCOPENT INSORANCE SYSTEM FOR EDUCATION OUPRAISE

Pirm/Dealer/Supplier/Contract

December 10, 2021

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

Bank Address BPI-LEGASPI-GAMBOA BRANCH, Makati City

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

FUNDS AVAILABLE:

RYAN R. RONQUILLO

OIC, Budget office

APPROVED:

DR. ARMEE N. ROSEL

VP, Research and Extension Services

Authorized Official/



DELIVERY DUE DATE: 1/9/2022

Procurement Unit Telefax No.: 045-962-4630

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

Work Order No.: 2021-109

Address

Tel No.:

Supplier:

Room 368. Timstate Building, 5438 South Super Highway.

Bangkal, Makati City

TIN

004-654-004-000 VAT Reg. 0916-214-8333//0218893-8382 Date: 11/25/2021

JO No. :

2021-125

Date:

10/22/2021

Mode of Procurement: Small Value Mode of Payments

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 20 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
		<ul> <li>Accidental Death or Permanent Disablement-pays when the following losses within 100 days from the date of accidents.</li> </ul>	injury results any of dent:		TOTAL COS
		1. Loss of life 2. Loss of two limbs 3. Loss of both hands, or all fingers 4. Loss of both feet 5. Total loss of sight of both eyes 6. Injuries resulting in being permanently bedridden 7. Any other injury causing permanent total disablement 8. Loss of arm at above elbow 9. Loss of arm between elbow and wrist 10. Loss of hand 11. Loss of four fingers and thumb of one hand 12. Loss four finger 13. Loss of thumb	% of Principal Sum 100% 100% 100% 100% 100% 100% 100% 100		
		14. Loss of index finger 15. Loss of middle finger 16. Loss of ring finger 17. Loss of little finger 16. Loss of metacarpals - first or second (additional)	10% 6% 5% 5% 3%	COMMIS R E	OMONAUPRITO CETVED

Charge to: ROA No.:

UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE

Purm/Decler/Supplier/Contractor December 10, 2021

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

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

Bank Name: \_\_\_ BPI

Bank Address BPI-LEGASPI-GAMBOA BRANCH, Makati City

FUNDS AVAILABLE:

RYAN R. RONQUILLO

APPROVED:

DR. ARMEEN, ROSEL

Page 4 of 5



DELIVERY DUE DATE:

1/9/2022

Procurement Unit Telefax No.: 845-982-4639

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

Work Order No.: 2021-109

Address:

Supplier:

Room 308. Timstate Building. 5438 South Super Highway.

Date:

11/25/2021

Bangkal, Makati City

10 No.:

004-654-004-000 VAT Reg.

2021-125

Tel. No.:

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

Date:

10/22/2021

Mode of Procurement: Small Value Mode of Payment

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 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 Ages

QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
	00000	19. Loss of metacarpals-third, fourth & fifth (additional)	2%	V1121 0001	TOTAL COST
		20. Loss of leg at above knee	60%		
		21. Loss of leg below knee	40%		
		22. Loss of one foot	50%		
		23. Loss of toes-all of one foor.	15%		
		24. Loss of big toe	5%		
		25. Loss of any toe other than big toe, each	1%		
		26. Lone of sight of one eye	50%		
		27. Loss of hearing-one ear	50%		
		NOTE: The Insurance Company to be assigned by UPRAISE, in accredited hospitals in Tarlac City. However, since this is a retype of Insurance Plan/Program, all the enrolled students of University who will be insured through UPRAISE, inc., can go available in the Province of Tarlac, for consultation, treatmen confinements, due to a particular accident or sickness/illness expenses incurred can be filed for reimbursement.	Imbursement Farlac State to any Hospitals it and		
		2 Burial Benefit/Separate Cosh Assistance for Natural Death of Confinements due to sickness/linesz will be subject to pre-existing and Staff only).	ng.	(commissión	on aupri 131 E 1 V E D
				REC By Date	E 1 V

ROA No. :

CONFORME & RECEIVE COPY:

INIFIED PROPERTY AND ACCOUNT HISUR PACE STSTEM SOR SUPERISE

FUNDS AVAILABLE: RYAN H. RONQUILLO OIG, Budget Office

irm/Dealer/Supplier/Contracto

December 10, 2021

Date

Bank Account Name LIPRAISE, Inc.

Bank Account Number: 1431-0118-55

Bank Name:

lank Address.

BPI-LEGASPI-GAMBOA BRANCH, Makati City

APPROVED:

DR. ARMEE'N. ROSEL

VP, Research and Extension Service

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



UNIFIED PROPERTY AND ACCIDENT INSURANCE

DELIVERY DUE DATE: //9/2022

Procurement Unit Telefax No.: 045-982-4630

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

Supplier:	<u>SYSTEM</u>	FOR EDUCATION (UPRAISE) AGENCY INC.		Work Order No.:	2021-109
Address:		3, Timstate Building, 5438 South Super Highway, Makati City		Date:	11/25/2021
TIN:	004-654	-004-000 VAT Reg.		JO No.:	2021-125
Tel. No.:	0916-21	4-8333/(02)8893-8382		Date:	10/22/2021
			N	Mode of Procurement:	Small Value
CID /MADAM.				Mode of Payment:	N/30
SIR/MADAM:					
		ereby advised to accomplish/deliver the following job			
277		Order as per quotation submitted by you duly approve	d by the TSU Con	nmittee on Bids and	Awards
and the Preside	,			HNIT COST	TOTAL COST
QTY.	UNIT	DESCRIPTION	rc endol i ed	UNIT COST	TOTAL COST
1	lot	FOR THE S.Y. 2021-2022	15 ENKULLED	384,552.00	<u>384.552.00</u>
		for 21,364 officially enrolled students			
		Schedule of Insurance Benefits - SY 2021-2022			
	ł	Accidental Death/Disablement	- Ps 75,000		
		Unprovoked Murder and Assault	- 75,000		
		Total Permanent Disability	- 75,000		
		Burial Benefit (accidental death)	- 20,000		
		Medical Expenses Reimbursement Benefit (accident case)	- 20,000 (per type of accident)		
		Separate cash assistance for Natural Death	- 20,000		
		Separate cash assistance for Natural Death due to COVID- 19	- 12,000		
		Daily Cash Allowance (60 days max accident confinement)	- 400day		
		Daily Cash Allowance (60 days maxsickness confinement including COVID-19)	- 400/day (not congenital)		T
		Daily Hospital Income Benefit for the first 10 days of ICU	- 400/day (not	COMMISSION ON A	and TSH.
		confinement (due to accident in addition to regular daily cash allowance of Ps 400/day)	congenital)	R E CIE/I	
		Ambulance Service Assistance with receipt (due to	- 1,500	By: - Date:	Time:
		accident)	(one time only)		3
		(Please read carefully at the bac	k hereof) 💍 🦓		-
Charge to:					
ROA No. :	ECEIVE CO	DV.		FUNDS AVAILABI	E:
CONFORME & RI	CCEIVE CO	ri:			
IINIEIED PROP	FRTV AN	D ACCIDENT INSURANCE SYSTEM FOR EDUCA	TION (UPRAISE	RYAN R. R	MODILLO
Firm/Dealer/Suppli	B 147.000			OIC, Bud	get office
					/ .
Date				APPROVED:	X
Bank Account Nai	me:				
Bank Account Nu	mber:				E N. ROSEL
Bank Name:					Extension Services
Bank Address:				Authorize	ed Official
Form No. : TSU-I	PRO-SF 10	Revision No.: 01	Effectivity Date: March	01, 2017	Page 1 of 5



Cumplion.

Bank Name:

Bank Address:

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

#### WORK ORDER

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

Dengue Cash Assistance Subject to actual medical

due to Sickness-one time only)

Case of Students) students in a year)

Other Features:

expenses) (in addition to Daily Cash Allowance Benefit

Tuition Fee/Miscellaneous Fees Refund -Accidental Death -

Annual Premium Per Student - Ps 18.00

 24 hours a day anywhere in the world whether at home or in the school for one whole year. It also includes drowning, dog and snake bites and all forms of animal bites, , lightning, earthquake, tidal waves, volcanic eruptions, typhoon, tornadoes, and landslides, and other accidents caused by natural calamities/acts of nature.

DELIVERY DUE DATE: 1/9/2022

Work Order No. 2021-100

COMMISSION ON AUDIT TSU

Authorized Official

Page 2 of 5

Procurement Unit Telefax No.: 045-982-4630

supplier.	910121.1	A ON DESCRIPTION (SERVICE) AND		WOLK OLGEL NO	<u> </u>
Address:		3. Timstate Building, 5438 South Super Highway, Makati City		Date:	11/25/2021
TIN:	004-654	-004-000 VAT Reg.		JO No.:	2021-125
Tel. No.:	0916-21	4-8333/(02)8893-8382		Date:	10/22/2021
				Mode of Procurement:	Small Value
				Mode of Payment:	N/30
SIR/MADAN	M:				
upon receipt of	of the Work (	Order as per quotation submitted by you duly approv	ed by the 130 C	ommittee on blus and	Awaius
and the Presid	dent of the A	gency	ed by the 150 C		
			- 2,500 (one time only)	UNIT COST	
and the Presid	dent of the A	DESCRIPTION Emergency Cash Assistance Benefit (due to fire and	- 2,500	UNIT COST	
and the Presid	dent of the A	DESCRIPTION  Emergency Cash Assistance Benefit (due to fire and earthquake)  CGL (Comprehensive General Liability - Combined single Limit)  (property damage & Bodily injury-within the school	- 2,500 (one time only) - 250,000	UNIT COST	TOTAL COS

- Ps 1,200 per

5,000 per

Effectivity Date: March 01, 2017

student

(maximum of 10 student

(Please read carefully at the back hereof) Charge to: ROA No.: FUNDS AVAILABLE: CONFORME & RECEIVE COPY: RYAN R. RONO UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE OIC, Budget office Firm/Dealer/Supplier/Contractor APPROVED: Bank Account Name: DR. ARMEE N. ROSEL Bank Account Number: \_ VP, Research and Extension Services



DELIVERY DUE DATE: 1/9/2022

Procurement Unit Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC.

Work Order No.: 2021-109

Address:

Supplier:

Room 308, Timstate Building, 5438 South Super Highway,

Bangkal, Makati City

Date:

11/25/2021

TIN:

004-654-004-000 VAT Reg.

JO No.:

2021-125

Tel. No.:

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

Date:

10/22/2021

Mode of Payment: N/30

Mode of Procurement: Small Value

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within <u>30 calendar days</u> 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
		<ul> <li>In and out of school attending regular classes or participating in other school activities</li> </ul>		
		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.		
		<ul> <li>While participating in a school sponsored and supervised athletics activities during or after regular school hours, on or off school premises.</li> <li>While travelling in public or private conveyance used for air, land and sea travel and;</li> </ul>		
		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.		
		<ul> <li>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.</li> <li>Members of the Board of Trustees (up to 70 years old will also be covered for 50% of the students' benefits</li> </ul>		
		Coverage Extensions: Accidents caused by Acts of Nature, Accidental Food Poisoning, Accidental Drowning, and All forms of Animal bites	Websiecion	ON AUDIT TSU
ule e		Period of Coverage-One Year (from the date of notice to proceed the issuance of the Policy)	R E C	1 V E D 4 DEG-202
		(Please read carefully at the back hereof)	12	
Charge to:			-201	
ROA No. : CONFORME & RE	ECEIVE CO	PY:	FUNDS AVAILABI	ZE:
NIFIED PROPI	ERTY AN	D ACCIDENT INSURANCE SYSTEM FOR EDUCATION (UPRAISE	RYAN R. R	ONOUNLLO
rm/Dealer/Suppli			OIC, Bud	get Office
Date	-		APPROVED:	<u></u>
ank Account Nan	ne:		V	
ank Account Nur	nber:		DR. ARME	È N. ROSEL
ank Name:			VP, Research and	
ank Address:			Authorize	ed Official
Form No . TSII-P	RO-SF 10	Revision No.: 01 Effectivity Date: March 0	01. 2017	Page 3 of 5



DELIVERY DUE DATE: 1/9/2022

Procurement Unit Telefax No.: 045-982-4630

UNIFIED PROPERTY AND ACCIDENT INSURANCE	UNIFIED	PROPERTY	AND	ACCIDENT	INSURANCE
---	---------	----------	-----	----------	-----------

SYSTEM FOR EDUCATION (UPRAISE) AGENCY INC. Supplier:

Work Order No.: 2021-109

Address:

Room 308, Timstate Building, 5438 South Super Highway,

Date:

11/25/2021

Bangkal, Makati City

10 No.:

TIN:

004-654-004-000 VAT Reg.

2021-125

Tel. No.:

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

Date:

10/22/2021

Mode of Procurement: Small Value

Mode of Payment:

N/30

SIR/MADAM:

You are hereby advised to accomplish/deliver the following job/work within 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

QTY.	lent of the A UNIT	DESCRIPTION	V	UNIT COST	TOTAL COST
QII.		Accidental Death or Permanent Disablement-pays when i the following losses within 180 days from the date of accidental days from the date of accidental days.	njury results any of ent:		
			% of Principal Sum		
		1. Loss of life	100%		
		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%		100
		14. Loss of index finger	10%		11
		15. Loss of middle finger	6%	FARMISSION ON	ADDIT- TSU:
		16. Loss of ring finger	5%	PECF	VED
		17. Loss of little finger	5%	CH LOT	DEC 2021
		18. Loss of metacarpals - first or second (additional)	3%	By Date	

(Please read carefully at the back no	ereor)	
Charge to: ROA No.: CONFORME & RECEIVE COPY:	FUNDS AVAILABLE:  RYAN R. RONQUILLO	7
UNIFIED PROPERTY AND ACCIDENT INSURANCE SYSTEM FOR EDUCATION	OIC, Budget Office	
Firm/Dealer/Supplier/Contractor	APPROVED:	
Date		
Bank Account Name:	DR. ARMEÉ N. ROSE	L
Bank Account Number:	VP, Research and Extension	Services
Bank Name:	Authorized Official	X
Form No.: TSU-PRO-SF 10 Revision No.: 01	fectivity Date: March 01, 2017 Page 4	of 5
FOIM NO. 150 THE S. T.		



DELIVERY DUE DATE: 1/9/2022

APPROVED:

Effectivity Date: March 01, 2017

DR. ARMEE'N. ROSEL

VP, Research and Extension Services
Authorized Official

Page 5 of 5

Procurement Unit
Telefax No.: 045-982-4630

Firm/Dealer/Supplier/Contractor

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

Bank Account Name:

Bank Account Number: \_

Date

Bank Name: \_\_\_ Bank Address:

Teletax No., o it	3-982-4630				
Supplier:	UNIFIED SYSTEM	PROPERTY AND ACCIDENT INSURANCE FOR EDUCATION (UPRAISE) AGENCY INC.	V	Vork Order No.:	2021-109
Address : TIN: Tel. No. :	Bangkal, M 004-654-	Timstate Building, 5438 South Super Highway,  Makati City  004-000 VAT Reg.  1-8333/(02)8893-8382		Date: JO No.: Date: de of Procurement:	
SIR/MADAI				ode of Payment:	<u>N/30</u>
upon receipt	of the Work (	ereby advised to accomplish/deliver the following job/w Order as per quotation submitted by you duly approved gency	by the TSU Com	mittee on blus and	
QTY.	UNIT	DESCRIPTION		UNIT COST	TOTAL COST
		19. Loss of metacarpals-third, fourth & fifth (additional) 20. Loss of leg at above knee 21. Loss of leg below knee 22. Loss of one foot 23. Loss of toes-all of one foot 24. Loss of big toe 25. Loss of any toe other than big toe, each 26. Lose of sight of one eye 27. Loss of hearing-one ear  NOTE: The Insurance Company to be assigned by UPRAISE, It accredited hospitals in Tarlac City. However, since this is a retype of Insurance Plan/Program, all the enrolled students of University who will be Insured through UPRAISE, Inc., can go available in the Province of Tarlac, for consultation, treatmer confinements, due to a particular accident or sickness/illness expenses incurred can be filed for reimbursement.	Tarlac State o to any Hospitals nt and ss. All valld medical	•	NAUDIT-TSU
	14:	> Burial Benefit/Separate Cash Assistance for Natural Death Confinements due to sicknesvillness will be subject to pre-exist conditions/erovisions-(For Faculty and Stoff only).	ung *****	RECE	IVED DEC-2021
		(Please read carefully at the back	k hereof)	3	
	& RECEIVE C	OPY:  ND ACCIDENT INSURANCE SYSTEM FOR EDUCA	TION (UPRAISI		RONQUILLO udget Office