



NOTICE TO PROCEED

ALPHA INSURANCE SURETY CO., INC.
4/F & 5/F Alpha Insurance Ctr., 1025
San Marcelino St., Ermita, Manila


Dear Sir/Madam:

Notice is hereby given to your office to commence the process for the PCHR Scholars Group Accident Insurance for one (1) year (for 3 Scholars).

Upon receipt thereof, you are responsible in providing the Group Personal Accident Insurance for one (1) year under the terms and conditions of the attached Purchase Order / Contract and in accordance with the delivery term.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one (1) copy and return the other to the Philippine Council for Health Research and Development (PCHR).

Very truly yours,


JAIME C. MONTOYA, MD, MSc., PhD, CESO II
Executive Director III

