

## COOP LIFE GENERAL INSURANCE AND FINANCIAL SERVICES AGENCY (CLIFSA) **CLIMBS Life & General Insurance Cooperative**

2/F CLIMBS Building Zone 5, National Highway, Bulua, 9000 Cagayan de Oro City, Philippines Tele/Fax No.: (088) 8565644 , www.clifsa.com.ph;E-mall Address: clifsa\_cdo@yahoo.com



# SURETY BOND Certificate of Coverage

MDS-Leyte

Issuing Office:

25-Nov-19

Policy Term:

From:

25-Nov-20

Policy Number: No

Total Premium P

7029-520-9-82

75,000.00 Issued Date: Total Coverage P.

2,536.80

Full Name	of the Cooperative:
Camplete /	ddroce:

SCHISTOSOMIASIS HOSPITAL EMPLOYEES CONSUMERS COOPERATIVE (SHECCO)

Brgy, Salvation, Palo, Leyte

DECLARATION		

## LIST OF COVERED EMPLOYEES:

Names of Employees	Position	Assigned To Limit of Liability F		Limit of Liability		Premium	
Maria Soccorro C. Cuevas	CHAIRMAN	НО	Php	25,000.00	Php	845.60	
Gina Luisita C. Morallos	TREASURER	НО	Php	25,000.00	Php	845.60	
Ma. Elaine VI N. Sarmiento	MANAGER	НО	Php	25,000.00	Php	845.60	
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5			Php	75,000.00	Php	2,536.80	

### Know all Men by these Presents:

That we as per declaration (hereinafter called the Employee/ accountable officers) as Principal and Coop Life General Insurance & Financial Services Agency (CLIFSA) a duly registered General Agency Insurance with Insurance Commission License No. 130031 duly organized and existing under the laws of the Philippines, with principal business address at 2/F Climbs Bldg., Zone 5, Bulua, Cagayan de Oro City (hereinafter called the Company), as Surety, are held and firmly bound unto a registered Cooperative from the Cooperative Development Authority as stated in the application form good and lawful money of the Philippines, for payment of which amount we do bind ourselves, our heirs, executors, administrator, successors and assigns, jointly and severally, firmly by these presents;

#### AND WE DECLARE THAT:

To indemnify it against loss on account of the personal dishonesty, amounting to larceny or estafa, of the Employee/ accountable officer in the performance of his duties in the position to which he has been appointed by the Employer;

Now, therefore, for and in consideration of the sum of Pesos as per declaration or fraction thereof, until said Bond, or any renewal, or extension, or substitution thereof, be cancelled in full by the person or entity guaranteed thereby or by a court of competent jurisdiction, which the Employer agrees to pay to the Company, the latter hereby covenants and agrees to and with the Employer, that it will indemnify up to the penal sum above stated, for any and all pecuniary loss of money, securities or other personal property, belonging to the Employer or in its possession and for which it is legally liable, sustained directly by the Employer, by or through the personal dishonesty of the Employee, and for which the Employee shall be legally liable to the Employer, where such personal dishonesty amounts to larceny or estafa as principal within the meaning of the penal code and where the same has been committed in the course of the above-mentioned position held by the Employee / accountable officer, occurring at any time during the term of the coverage.

WARRANTIES AND CLAUSES

Deductible Clause Inventory Loss Exclusion Conviction Clause War & Terrorism Excl. Endt. PD Clarification Clause

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