

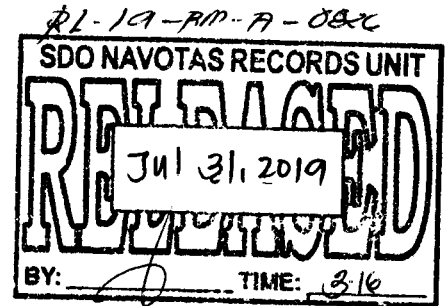


Republic of the Philippines
Department of Education
National Capital Region
SCHOOLS DIVISION OFFICE, NAVOTAS CITY
Bagumbayan Elementary School Compound,
M. Naval St., Sipac, Navotas City



July 31, 2019

TO: Public Elementary/Secondary/Senior High School Principals
Faculty Club Presidents




Dear Sir/Madam:

Attached is a letter from **Mrs. Felicidad O. Villaflor**, School Faculty President, Tangos Elementary School, this Division, re: request for financial assistance for **Ms. Jhoanna S. Eugenio** Teacher, that School who has an End Stage Renal Disease (ENRD) for ten (10) years, for your information and guidance.

Voluntary financial assistance may be coursed through **Mrs. Villaflor** or directly given to the family of Ms. Eugenio.

Thank you.

Very truly yours,


MELITON P. ZURBANO
Assistant Schools Division Superintendent
OIC- Office of the Schools Division Superintendent

Navotas II



Division of City Schools, Navotas
District of Navotas II
TANGOS ELEMENTARY SCHOOL
J. Pascual Street, Tangos, Navotas City

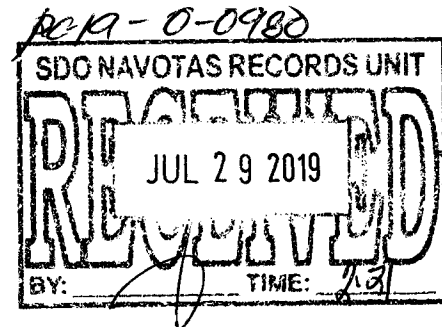


July 11, 2019

Dr. MELITON P. ZURBANO, CESE
OIC-School Division Superintendent
Division of Navotas City

Sir:

Greetings!



I would like to inform your good office that Jhoanna S. Eugenio, a teacher from Tangos Elementary School was diagnosed for End Stage Renal Disease (ENRD). She is a dialysis patient for ten (10) years at National Kidney Institute at East Avenue, Quezon City. Being an active member of this Division and member of APESTON, She has the right to receive financial assistance of Php. 20.00 for every teacher in our Division immediately.

I hope that this request merit your favorable action.
Attached herewith is her medical abstract, treatment and protocol.

Very truly yours,

MRS. FELICIDAD O. VILLAFLO
Faculty Club President

Noted:

MISS FRESNEDI V. NATIVIDAD
Principal

MELINDA N. CRUZ
President - District of Navotas II

EVANGELINE R. AVENDAÑO
Public Schools District Supervisor
Navotas II

25 June 2019

To whom It May Concern:

The Undersigned is a dialysis patient for ten years and would like to appeal for your voluntary contribution to augment the burden of my dialysis sessions.

Any contribution would appreciate the undersigned whatever the amount.

Thank you for your immediate attention

Respectfully Yours,
 Joanna S. Eugenio
 Dangas Elementary School
 NKT# NWF 1st Shift

ARVIN RUSSEL
MEDICAL RECORDS
CLERK III



NATIONAL KIDNEY & TRANSPLANT INSTITUTE
East Avenue, Quezon City
981-03-00 or 981-04-00

CLINICAL ABSTRACT

NAME

JHOANNA S. EUGENIO

Date:

17 May 2019

ADDRESS:

#6 AR. CRUZ ST., TANAS, NAVOTAS CITY, METRO MANILA

AGE:

45 years old

SEX:

Female

HOSPITAL NUMBER:

DATE OF CONFINEMENT / CHECK-UP:

17 May 2019

I. DIAGNOSIS

End Stage Renal Disease (ESRD)

II. MEDICATIONS

Aspirin 400mg 3x a week
Renvela 500mg 1-1-1
Calcium carbonate 1-1-1
Sodium Bicarbonate 1-1-1
Cimetidine 1-1-1
Lasix 100mg 1-1-1

Chromolone 1-1-1
Ciprofloxacin 1-1-1
Amoxicillin 1-1-1
Folic Acid 1-1-1

III. RECOMMENDATIONS

Hemodialysis (MWF)

Physician

FLORENCIO J. PIRILLO
(Signature over name)

NOT VALID WITHOUT OFFICIAL SEAL

06/21/16

License No.:

04672

MRL-WIF-038

