



Republic of the Philippines  
**Department of Education**  
REGION VI – WESTERN VISAYAS  
SCHOOLS DIVISION OF AKLAN

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**Division Advisory No. 036 s. 2026**

04 March 2026

In compliance with DepEd Order (DO) No. 8 s. 2013,  
this advisory is issued not for endorsement per DO 28, s. 2001,  
but only for the information of DepEd Division of Aklan  
officials and personnel/staff.

Attached is an endorsement letter from Dr. Joyce M. Toriaga, Public Schools District Supervisor, District of Numancia, this Division, requesting financial support for **Mrs. Fe I. Padran**, Teacher III of Numancia National School of Fisheries, who met a motor vehicular accident on November 25, 2025 resulting in multiple injuries, including fracture open segmental tibial right and multiple rib fractures.

For voluntary financial assistance, please channel it to Mrs. Feby D. Moleta, Administrative Officer IV (Cash Section, DepEd-Division Office, Numancia, Aklan).





Republic of the Philippines  
**Department of Education**  
REGION VI – WESTERN VISAYAS  
DIVISION OF AKLAN  
**DISTRICT OF NUMANCIA**  
Pob. Numancia, Aklan



**2<sup>ND</sup> Indorsement**  
December 22, 2025

Respectfully forwarded to the Schools Division Superintendent, Dr. Feliciano C. Buenafe, Jr. CESO VI, Division of Aklan, Numancia, Aklan the herein request for financial assistance to all Schools in the Division of Aklan the attached 1<sup>st</sup> endorsement from Numancia National School of Fisheries, Albasan, Numancia, Aklan, requesting financial assistance for the hospital bill and medical treatment of **Mrs. FE I. PADRAN**, Teacher III of Numancia National School of Fisheries, who met a motor vehicular accident on November 25, 2025 resulting in multiple injuries, including fracture open segmental tibial right and multiple rib fractures.

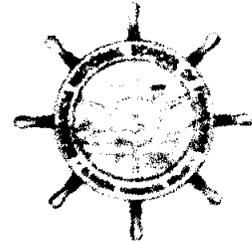
Given the urgency of her medical and financial needs, the undersigned highly recommends the consideration and approval of the said request.

Attached are the medical diagnosis, medical abstract and summary of hospital bills, recommending appropriate action.

  
**JOYCE M. TORIAGA, PhD**  
Public Schools District Supervisor



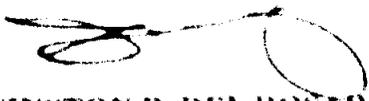
Republic of the Philippines  
**Department of Education**  
Region VI – Western Visayas  
DIVISION OF AKLAN  
NUMANCIA NATIONAL SCHOOL OF FISHERIES  
Albasan, Numancia, Aklan



## 1<sup>st</sup> Indorsement

December 12, 2025

Respectfully referred to the Schools Division Superintendent, Division of Aklan, Dr. Feliciano C. Buensafe, Jr. CESO VI, thru the Office of Public Schools District Supervisor, Dr. Joyce M. Toriaga, District of Numancia, the herein request for financial assistance to all Schools in the Division of Aklan for hospital bill and medical treatment of Mrs. Fe I. Padran, Teacher III of Numancia National School of Fisheries, Albasan, Numancia, Aklan who met a motor vehicular accident on November 25, 2025 with medical diagnosis of multiple injuries, fracture open segmental tibial right; multiple rib fracture right S/P open treatment of tibial shaft fracture recommending for financial assistance.

  
WINSTON B. DEL ROSARIO  
School Principal III

WBR/pams

# REQUEST FOR FINANCIAL ASSISTANCE

December 11, 2025

**WINSTON B. DEL ROSARIO**  
School Principal III  
Numancia National School of Fisheries  
Albasan, Numancia, Aklan

Sir

Greetings in the Name of God!

I am writing to humbly request financial assistance for my hospital bill and medical treatment. I am seeking help to pay for my hospitalization bills and follow-up check-up.

Currently, I am on sick leave due to a vehicular accident that occurred last November 25 2025 which caused multiple fractures bone in my right leg, ribs, and pelvic bone.

I have undergone a major operation – stainless implantation in my right leg.

Attached are my medical abstract, medical certificate, and hospital bills.

Thank you for considering my application for my medical assistance. Your kindness and generosity will have a lasting impact, and I look forward to your positive response.

Sincerely Yours,

**FEL PADRAN**

CERTIFIED  
TRUE COPY



**STATEMENT OF ACCOUNT**

SOA Reference No.: 2025-208677

**SAINT GABRIEL MEDICAL CENTER, INC.**

Arch Gabriel M. Reyes Street Poblacion Kalibo (Capital) Aklan Philippines Aklan 5600

(036)268-1623 to 27

Name of Patient: PADRAN, FE IGUIN Age: 57 Date & Time Admitted : 11/25/2025 10.42 A  
 Address : Albasan, Numancia, Aklan Date & Time Discharged : 12/9/2025 10.06 AM  
 Person Responsible For The Account: EFREN VELANQ II (Partner) - 09477751327 HMO/Guarantor:

Final Diagnosis/es and ICD 10 Code/s:

First Case Rate : 27759  
 Second Case Rate : \_\_\_\_\_

1 S82.2 Fracture of shaft of tibia

Surgical Procedure/s and RVS Code/s, if Applicable :

1 27759 OPEN TREATMENT OF TIBIAL SHAFT FRACTURE (W/ OR W/O FIBULAR FRACTURE) BY INTRAMEDULLARY IMPLANT, W/ OR W/O INTERLOCKING SCREWS AND/OR CERCLAGE

**SUMMARY OF FEES**

Particulars	Actual Charges	VAT exempt	Amount of Discounts		Philhealth Benefits		Out of Pocket of Patient
			Senior Citizen/ PWD	Place <input checked="" type="checkbox"/> <input type="checkbox"/> PCSO <input type="checkbox"/> DSWD <input type="checkbox"/> DOH (MAY) <input type="checkbox"/> HMO <input checked="" type="checkbox"/> Others:	First Case Rate Amount	Second Case Rate Amount	
<b>HCI fees</b>							
Room and Board (Room no 406) 7.00 Day(s) @ 1650.00, (Room no EX-4) 1.00 Day(s) @ 4200.00 (Room no 322) 6.00 Day(s) @ 1950.00	27,450.00	0.00	0.00	558.17			
Drugs and Medicines	72,357.77	0.00	0.00	1,362.53			
Laboratory & Diagnostics	20,855.00	0.00	0.00	214.74			
Operating Room fee	0.00	0.00	0.00	0.00			
Supplies	24,149.51	0.00	0.00	375.04			
Others: pls specify							
OTHER SERVICE FEE	51.00	0.00	0.00	1.04			
Other Supplies	1,500.00	0.00	0.00	30.50			
Others	6,422.00	0.00	0.00	89.11			
Procedure	5,600.00	0.00	0.00	113.87			
<b>Total</b>	<b>158,385.28</b>	<b>0.00</b>	<b>0.00</b>	<b>2,748.00</b>	<b>23,400.00</b>	<b>0.00</b>	<b>132,240.28</b>
<b>Professional fee/s</b>							
DR. AS ROEL ALMENDRALEJO	131,690.40	0.00	0.00	0.00			114,000.00
DR. MARSHA LOURDES	43,345.20	0.00	0.00	5,000.00			29,500.00
DR. JANNY ADIOVA	30,348.40	0.00	0.00	5,000.00			22,400.00
	205,384.00	0.00	0.00	10,000.00	28,400.00	0.00	166,984.00
	363,769.28	0.00	0.00	12,748.00	52,804.00	0.00	298,225.28

**CERTIFIED TRUE COPY**

STATEMENT OF ACCOUNT

SOA Reference No.: 2025-208677

**SAINT GABRIEL MEDICAL CENTER, INC.**

Arch Gabriel M Reyes Street Poblacion Kalibo (Capital) Aklan Philippines Aklan 5600

(038)268-1623 to 27

Name of Patient: PADRAN, FE IGUIN Age: 57 Date & Time Admitted : 11/25/2025 10:42 A  
 Address : Abasan, Numancia, Aklan Date & Time Discharged : 12/9/2025 10:08 AM  
 Person Responsible For The Account: \_\_\_\_\_ HMO/Guarantor: \_\_\_\_\_  
FREN VELANO II (Partner) - 09477751327

Payments	
Payments	145,273.95
<b>Subtotal</b>	<b>145,273.95</b>
<b>BALANCE DUE 152,866.33</b>	

Prepared by TABANEDA, BRYAN MALIHAN  
 Billing Clerk/ Accountant  
 Signature over printed name)

Checked Correct [Signature]  
 By: Dona S. T. Melano  
MERCY Z. SUCRO

Conforme

Billing Section  
 Signature over printed name)  
12-09-25

Member/Patient/Authorized representative  
 (Signature over printed name)  
 Relationship to member of authorized representative)

**CERTIFIED TRUE COPY**

