

REQUEST FOR CERTIFICATE OF INSURANCE



SMCSIG



DATE OF REQUEST: July 31, 2023  
JPA MEMBER: San Mateo County Schools Insurance Group  
ADDRESS: 1791 Broadway CITY, STATE, ZIP: Redwood City, CA 94063  
PHONE NUMBER: (650) 365-98180 FAX: (650) 365-9263

DISTRICT REQUESTING CERTIFICATE:

ADDRESS: 181 Encinal Ave. CITY, STATE, ZIP: Atherton, CA 94027  
CONTACT PERSON: Willy Haug  
PHONE NUMBER: 650.321.7140 FAX: 650.321.7184  
EMAIL: whaug@mpcsd.org

ORGANIZATION REQUESTING CERTIFICATE:

NAME OF CERTIFICATE HOLDER: Apple INC. and its assigns  
ADDRESS: 8377 East Hartford Dr. Suite 115 CITY, STATE, ZIP: Scottsdale, AZ 85255  
CONTACT PERSON: Julie McMahon  
PHONE NUMBER: 480.604.8599 FAX: \_\_\_\_\_  
EMAIL: jmcMahon@bankunited.com

SHOULD CERTIFICATE HOLDER BE LISTED AS ADDITIONAL INSURED? YES

NO Please note APPLE INC and its assigns as "LOSS PAYEE"

DESCRIPTION OF ACTIVITY/CONTRACT: Lease of 850 9th generation ipads, control # 103653. Value = \$390,953.52

DATE(S) COVERAGE NEEDED: FROM: July, 2023 TO: June, 2024

EMAIL OR FAX CERTIFICATE TO: \_\_\_\_\_ District Office  
(Circle One) \_\_\_\_\_ Certificate Holder (Original will be emailed)

Other whaug@mpcsd.org  
Name: Willy Haug  
Address: 181 Encinal Ave.  
Atherton, CA 94027

PLEASE RETURN FORM TO SMCSIG ALONG WITH INFORMATION REGARDING ACTIVITY/CONTRACT