REPUBLIC OF THE PHILIPPINES
Phil Health Insurance Corporatio
709 CityState Center Bldg.
Shaw Blvd. Brgy. Oranbo, Pasig City
Telefax No. 637-3158

PRID-PS-07

PURCHASE ORDER

Supplier	**PBT TECHNOLOGY SOLUTIONS, INC.**
Address	Unit A4 Marvin Plaza Bldg., Pasong Tamo, Makati City
Tel.Fax No.	818-9491 / 818-9445 / 818-9443 / Fax No. 818-9497
Supplier Registered with:	PHILHEALTH

P.O No.:	**09-133-12**
Date:	September 13, 2012
Term of Payment:	On Account
Mode of Procurement:	Local Shopping

Office Order No. 0017, s. 2012

Please deliver to this office within ___ **15 working days** ___ from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	3	ca	Ink cartridge for HP Deskjet Printer 3745, Model: 8727A, Black	760.00	2,280.00
					2,280.00
			LESS:		
			EWT 1% 20.36		
			GMP 5% 101.79		122.15
					2,157.85
			RIV #		
			12-0547 dtd. 08/06/12 PRID-PRSMD - Ely E. Roxas		

09 - 217

Term & Conditions:

1. The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent of the total value of undelivered order for each day of the delay as liquidated damages.
2. If the date of receipt of the Purchase Order / P.O. by the dealer is not indicated, it shall be deemed received on the day it was acknowledge to have been received by a representative either through fax or e-mail
3. Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City
4. Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
5. All original and atleast One (1) Year Expiration. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery.
6. Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report

Very truly yours,

LOLITA V. TULIAO, CESO V
Senior Manager, PRID

Certified Budget Available:	Funds Available in the amount of:	Php2,280.00	APPROVED:
CORAZON M. TABULAO Fiscal Controller III	**LILIA R. GARRIDO** Fiscal Controller III		**OCTAVINO Q. ESGUERRA** Senior Vice President, MSS HEAD OF THE AGENCY or Authorized Representative

Within the COB: CY W/2
Expense Code: 785 (IT Supplies)
Budget: P 2,280 -
Remarks: Per BR # 1495 (~ 2011

CONFORME:	Received copy of P.O.:
JUSTINIAN? ANDRES SR. MESSENGER / COLLECTOR Signature over Printed Name and Position of authorized representative	9/10/12 Date