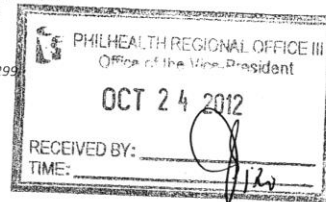


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Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
REGIONAL HEALTH INSURANCE OFFICE III
 PhilHealth Bldg., Lazatin Blvd., San Agustin,
 City of San Fernando, Pampanga
 Tel. No. (045) 961 4175 loc. 4332 / Fax No. (045) 963 0299



JOB ORDER
 (Non-Inventoriable Items)

Supplier: **BLW SERVICE CENTER CO.**
 Address: Lazatin Blvd., Villa Victoria Rd., CSFP
 Tel./ Fax No.: (045) 963 4805
 Supplier Registered with: PHILHEALTH

Work Order No.: **12-076-JO**
 Date: **October 19, 2012**
 Term of Payment: **15 Days**
 Mode of Procurement: **Small Value**
 Office Order No. **0023., s. 2010**

Please deliver to this Office within **7 Working Days** from receipts of final proof.

NO.	QTY.	UNIT	ITEM / DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	pc	Oil Filter	280.00	280.00
	7	ltr	Motor Oil	175.00	1,225.00
	1	pc	Fuel Filter	480.00	480.00
	1	lot	Change Oil	100.00	100.00
			Tune-up	200.00	200.00
	1	pc	Timing Belt	2,780.00	2,780.00
	1	pc	Cam Oil Seal	580.00	580.00
	1	pc	Idler Bearing	3,510.00	3,510.00
	1	pc	Tensioner Bearing	2,890.00	2,890.00
	1	pc	Crank Oil Seal	1,470.00	1,470.00
	1	lot	Labor	1,500.00	1,500.00
-----NOTHING FOLLOWS----- (For SHV-122 Toyota Innova use)					
RJV#: 12-374-R3				TOTAL AMT.	PHP 15,015.00

Conditions:

1. The Agency shall impose penalty in an amount equivalent to 1/10 of 1 percent of the value of undelivered order for each day of the delay as liquidated damages.
2. Render your bills in triplicate copies including the original.
3. If the date of receipts of this Job Order (J.O.) by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval.
4. For imported items, IMPORTATION DOCUMENTS specifically showing the condition, serial numbers of the equipment purchased, and tax receipts, should be submitted by the supplier.
5. Delivery shall be made only on MONDAYS to THURSDAYS not later than 3 P.M. except for emergency cases wherein prior notification in such cases shall be given by this office.

Very truly yours,

GRACE M. MAMAWAL
 Chief, Management Services Division

Certified Budget Available:	Funds Available in the amount of: PHP 15,015.00	APPROVED
LEONIDAS A. LUMBA Administrative Officer IV Within the COB: _____ Expense Code: _____ Budget: _____ Remarks: _____	ANGELITA S. REYES Fiscal Controller IV 10/23/12	ARSENIA B. TORRES OIC, Vice-President for PRO III 10/23/12
CONFORME: SIGNATURE OVER PRINTED NAME OF SUPPLIER/ REPRESENTATIVE 10/23/12 DATE RECEIVED COPY OF J.O. CORP-PRO III FINANCE DIV.-ACCOUNTING UNIT		

OCT 23 2012

Received by: [Signature]
 Time: [Signature]