Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
PhilHealth Regional Office IVA
AMCJ Square Building, Diversion Road, Brgy. Bocohan, Lucena City
Healthline (042) 373-7782 region4a@philhealth.gov.ph

PURCHASE ORDER

Supplier:	**PROJECTS UNLIMITED (PHIL.), INC.**	P.O. No.:	12-158
Address:	620 Oriente St., Binondo, Manila	Date:	10/17/12
Tel./Fax No.:	(02) 243-3528	Terms of Payment:	on account
Supplier Registered with:			NP-SV

Please deliver to this office within 15 days from receipt hereof of the following

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	lot	Supply, Delivery and Installation of 619.13 sq.ft Roll-Up	65,008.65	65,008.65
		Shades at Calamba LHIO		
		Material: A4008 & A4010 (please see attached sample to		
		quotation)		
		****nothing follows****		65,008.65
		Less taxes: VAT 5%	2,902.17	
		EWT 1%	580.43	3,482.60
			=p=	**61,526.05**

CONDITION

1. The agency shall impose equivalent to 1/10 of 1 percent of the total value of the undelivered order for each day of delay as liquidated damages.
2. Render your bills in triplicate copies including the original.
3. If the date of receipt of the P.O. by the dealer is not indicated, it shall deemed on the 10th working day from the date of the approval of the P.O.
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.

Very truly yours,

MIGUEL T. MACALINAO
Division Chief, MSD

Funds available in the amount of: 65,008.65

Approved by:

FELICIANA O. PASTORPIDE
Fiscal Controller IV

ALBERTO C. MANDURIAO
RVP, PRO IV-A

Received copy of P.O. on Oct. 23, 2012
Date

By: ______________

CONFORME:

DANTE A. TRABEZONDA
Print Name and Signature of Supplier