

REPUBLIC OF THE PHILIPPINES
PHILIPPINE HEALTH INSURANCE CORPORATION
Philhealth Regional Office V
Alternate Road, Legazpi City

PURCHASE ORDER

Supplier **BODEGA GLASSWARE**
Address **Naga City**
Telephone No.
Supplier Registered with:

P.O. No. *049-127*
Date: *4/13/12*
Terms of payment:
Charge
Mode of Shopping:
Public Bidding

Please deliver to this office within 30 days from receipt hereof the following

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	unit	Low end digital camera, Sony DSC-W530	8,489.00	8,489.00
4	unit	Flat TV 32", JVC LT32D1 w/ built-in DVD	24,894.00	99,576.00
2	unit	Wireless microphone heavy duty, Shure	5,989.00	11,978.00
		XXXXXXXXXXXXXXXXXXXXXXXXXXXX		120,043.00
		phro v & SO use		
<div style="border: 1px solid black; padding: 10px; text-align: center;">Budget Section OBLIGATION NO. V-051-04-12 CAPEX 238.00 [2011 Continuing Appropriations] P120,043.00 Approved: <i>[Signature]</i> SHIRLEY S. VICTORIA Fiscal Controller IV 4/23/12 2:10 PM</div>				

Conditions:

- 1.) The agency shall impose penalty in an amount equivalent to 1/10 of 1% of the total value of the undelivered order for each day of delay as liquidated damages.
- 2.) render your bills in triplicate copies including your original.
- 3.) If the date of receipt of the P.O. by the dealer is not indicated, it shall be deemed received on the tenth working day from the date of the approval of the P.O.
- 4.) For imported items, IMPORTATION DOCUMENTS specifically showing the condition, a serial number of the equipment purchase and tax receipts should be submitted by the supplier.

Funds Available in the amount of *120,043.00*

[Signature]
JOSEPH V. ALBA
Fiscal Controller II

Very Truly Yours

[Signature]
LORENA M. RUBIS
Chief, Mgt. Services Div.

Approved By: *[Signature]*

ORLANDO D. INIGO, JR.
Regional Vice President

Received copy of P.O. on *4/11/12*

Conforme: *[Signature]*
VERA CYNDY. TORRES

By: _____

Print name and Signature
of Supplier/Representative

PhilHealth Regional Office 5

APR 16 2012