

Republic of the , hilippines

PHILIPPINE HEALTH INSURANCE CORPORATION

Philhealth Regional Office VI, Majestic Bldg. #15 J. De Leon St. 1000 Tel Nos. 3378724 / 5087300 region6@philhealth.gov.ph

PURCHASE ORDER

Supplier: <u>NIÑAS EATERY</u> Address: <u>Jalandoni St., Iloilo City</u>

Tel./Fax: <u>300-4079</u> Supplier Registered with:
 P.O. No:
 6111-003

 Date:
 1/18/2012

 Terms of Payment:
 30 calendar days

 Mode of Procurement:
 Negotiated Procurement

 RIV No.:
 004-01-12

RECEIVED

LHEALTH REGIONAL OFFICE V

MSD-FMS-COMPTROLLERSHIP

Please deliver to this Office on February 13, 2012 upon receipt hereof :

1201-0808

RELEASE

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	66	PAX	SNACKS - AM	80.00	5,280.00
	10	PAX	LUNCH	120.00	- 1,200.00
	*****	******	****For the donors and PNRC staff for PhRO VI Bloodletting Activity on February 13, 2012 in line with the 17th Year Anniversary of PhilHealth*	**********	
				TOTAL	6,480.00

Conditions:

*The Agency shall impose a penalty in the amount equivalent to 1/10 of 1 percent of the value of undelivered order for each day of the delay as liquidated damages.

*Render your bills in triplicate copies including the original.

*If the date of receipt of this P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval.

*For imported items, IMPORTANT DOCUMENTS specifically showing the condition, serial numbers of the equivalent purchased, and tax receipts should be submitted by the supplier.

Very truly yours

Approved:

MAS, Ph.D. URP DENNIS S. **RVP - PhRO VI**

Fund available in the amount of : JONALYN T Fiscal Controller III 30/12

Received copy of P.O. on 1 By: Nenia Guixabar

CONFORME:

(Printed Name & Signature of Supplier/Rep.)