



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 Philhealth Regional Office VI, Majestic Bldg. #15 J. De Leon St.,
 Tel Nos. 3378724 / 5087300 region6@philhealth.gov.ph

PHILHEALTH REGIONAL OFFICE VI MSD-FMS-CONTROLLERSHIP	
RECEIVED	RELEASED
BY DATE: <i>2/21/12</i>	BY DATE: <i>2/24</i>

PURCHASE ORDER

Supplier: TOPMOST DEV'T. MARKETING CORP.

Address: San Rafael, Mandurriao

Iloilo City

Tel./Fax: 508-4868

Supplier Registered with:

Please deliver to this Office **within 15 calendar days** upon receipt hereof :

P.O. No: 61202-038

Date: 2/16/2012

Terms of Payment: 30 calendar days

Mode of Procurement Negotiated Procurement

RIV No.: 097-01-12

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	LOT	LABOR & MATERIALS FOR THE REPAIR OF:		1,700.00
			<i>2</i> 2.0HP WINDOW TYPE AIRCON		
			SN: 13240605-10118		
			Location: BAS		
			Materials needed: Brand New - original		
	2	pcs	Fan Motor Bearings		
			Job Description:		
			Pull-out & replace of fan motor bearings		
	*****	*****		*****	1,700.00
			For PhRO VI use	TOTAL	

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,

[Signature]
MARJORIE A. CARIETO
 CHIEF, MSD

Fund available in the amount of: 2 1700.

Approved:

[Signature]
JONALYN T. ILISAN
 Fiscal Controller III/F

[Signature]
JEJEN ROSE O. GAVINO
 Fiscal Controller IV

[Signature]
DENNIS S. MAS, Ph.D. URP
 RVP - PhRO VI

Received copy of P.O. on 2/24/12

By: maricel Cogin

CONFORME:

[Signature]
TOPMOST DEV'T. MARKETING CORP.
 (Printed Name & Signature of Supplier/Rep.)