



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

PHILHEALTH REGIONAL OFFICE VI MAJESTIC BLDG. #15 J. DE LEON ST. ILOILO CITY		RELEASED
BY/DATE: <u>HL 3/2</u> <u>HL 3/5</u> <u>2:50PM</u>	B*/DATE: <u>3/6</u>	

### PURCHASE ORDER

Supplier: **ILOILO PRINTING SERVICES**  
 Address: **R. Mapa st.**  
**Mandurriao, Iloilo City**  
 Tel./Fax: **333-1489**

P.O. No: **61202-044**  
 Date: **2/29/2012**  
 Terms of Payment: **30 calendar days**  
 Mode of Procurement: **Negotiated Procurement**  
 RIV No.: **164-02-12**

Supplier Registered with:  
 Please deliver to this Office **within 30 calendar days** upon receipt hereof:

**1203-0640**

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	10000	pcs	<b>LIFETIME MEMBERSHIP PROGRAM ID</b>	<b>0.30</b>	<b>3,000.00</b>
			Specifications:		
			Size: 6cm x 12cm		
			Stock: Vellum # 100		
			Print: 2 side print		
			Color: Front - full color		
			Back - 1 color		
			Others: With Perforation		
	50000	pcs	<b>PHILHEALTH IDENTIFICATION CARD</b>	<b>0.33</b>	<b>16,500.00</b>
			Specifications:		
			Size: 9 cm x 6 cm per card		
			Stock: Vellum 100 lbs		
			Color: Full color, 2-sided print		
			Process: Offset Printing		
			Others:		
			*CD Supplied with perforations		
			*PhilHealth logo is placed at the left top corner of the card, above the box provided for the member's 1 1/2" x 1 1/2" photo		
			*A magnified PhilHealth logo with yellow and green fine print is set as background in watermark design		
			see attached actual sample		
			*****Nothing Follows*****		
			Purpose: For PhRo VI use	<b>TOTAL</b>	<b>19,500.00</b>

#### 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,

**MANJORTE A. CABRIETO**  
 CHIEF, MSD

Fund available in the amount of : **3 19500.-**

Approved:

**JONALYN T. ILISAN/JELLEN ROSE CHU GAVINO**  
 Fiscal Controller III/Fiscal Controller IV

**REYNALDO P. SUGANG, JR., MD**  
 OFFICER-IN-CHARGE  
 PHILHEALTH REGIONAL OFFICE VI

Received copy of P.O. on  
 By: **GONZALES**

CONFORME:

**ILOILO PRINTING SERVICES**

(Printed Name & Signature of Supplier/Rep.)