

## Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

Philhealth Regional Office VI, Majestic Bldg. #15 J. De Leon St., Iloilo Ci

Tel Nos. 3378724 / 5087300 region6@philhealth.gov.ph

## **PURCHASE ORDER**

Supplier: **EMCOR INCORPORATED** 

P.O. No:

61203-058

Address: Benigno Aquino Avenue, Mandurriao

Date:

3/26/2012

Iloilo City

Terms of Payment:

30 calendar days

Tel./Fax: 321-3813

Mode of Procurement

SIZE HEALTH REGIONAL DEFICE VI MODITAL COMPTROLLERS HIL

RECEIVED

**Negotiated Procurement** 

Supplier Registered with:

RIV No.:

107-01-12

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

1204-0154

KELEAGED

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	40	BXS	RIBBON FOR EPSON DOT MATRIX PRINTER	85.00	3,400.0
			LX-300		
			For 1st qtr CY2012 Common Computer Supplies for PhRO VI and SO use	TOTAL	3,400.00

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,

CHIEF, MSD

Fund available in the amount of:

Approved:

4-10-10

JONALYN T. ILISAN/JEIJEN ROSE CHU-G

Fiscal Controller III/Fiscal Conroller IV

RVP - PhRO VI

Received copy of P.O. on P.O. on RV. By:

CONFORME:

**EMCOR INCORPORATED** (Printed Name & Signature of Supplier/Rep.)