

Republic he 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

PURCHASE ORDER

Supplier: TRITONICS COMPUTER SERVICES

P.O. No:

61204-083

Address: Fuentes St., Iloilo City

Date:

4/26/2012

Terms of Payment:

30 calendar days

1205-308

Tel./Fax: 338-3816 Supplier Registered with: Mode of Procurement:

Negotiated Procurement

RIV No .:

265-04-12

Please deliver to this Office within 10 calendar days upon receipt hereof:

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	76	pcs	STREAMER - TARPAULIN	360,00	27,360.00
	/		Dimension 3 x 6 ft - Substance 13		
	-		X		
-	******	******	For Philhealth Cares Announcement	***************************************	27.360.00
				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,

CHIEF, MSD

Fund available in the amount of

Approved:

JONALYN'T, ILISAN/JEIJEN ROSE CHU-GAVINO

Fiscal Controller III/Fiscal Conroller IV

MARJORIE A. CABR

OIC-PhRO VI

Received copy of P.O. on

CONFORME:

TRITONICS COMPUTER SERVICES

(Printed Name & Signature of Supplier/Rep.)