



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

PURCHASE ORDER

Supplier: TUGADO LAW OFFICE/ATTY. ALTHEA B. TUGADO

Rm. 4 Jamerian Bidg., Iznart st.,

P.O. No: Date:

61206-145

Address: Ilollo City

Terms of Payment:

June 29, 2012 COD - upon complete billing

337-4447 Tel./Fax:

Mode of Procurement:

Negotiated Procurement

Supplier Registered with:

RIV No.:

371-06-12

Please deliver to this Office within 2 days upon receipt of all MOA:

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	136	LGUs	NOTARIZATION OF MOA FROM LGU	120.00	16,320.00
			Note: Subject to actual notarize MOA		
			For PhRO VI use		
	\vdash			TOTAL	16.320.00

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,

16320. Fund available in the amount of :

Approved:

JONALYN T. ILISAN/JEIJEN ROSE CHU-GAVIN

Fiscal Controller III/Fiscal Conroller IV

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

Received copy of P.O. on

CONFORME:

(Printed Name & Signature of Supplier/Rep.)