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

8/16

PURCHASE ORDER

Supplier: **TRIDON'S VENTURES INC.**
Address: **Plazuela de Iloilo, Benigno Aquino Ave., Mandurriao**
Iloilo City
Tel./Fax: **508-8859**
Supplier Registered with:

P.O. No: **61208-175**
Date: **August 15, 2012**
Terms of Payment: **15 Calendar days**
Mode of Procurement: **Negotiated Procurement**
RIV No.: **463-08-12**

Please deliver to this Office **on August 16, 2012** upon receipt hereof :

1208-1757

NO	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	1	LOT	**DINNER ON AUGUST 16, 2012**		
	10	pax	**MENU:**	350.00	**3,500.00**
			Soup - Imbao Sabaw		
			Side Dish - Vegetables		
			Main Courses - Crispy Pata		
			Lechon Manok		
			Managat and Crab Meat		
			Dessert - Buko Pandan		
			Rice - Alige Rice, Plain Rice		
			Drinks - Softdrinks		
			For President & CEO Eduardo P. Banzon		
			and Officers		
				TOTAL	**3,500.00**

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,

MARJORIE A. CABRIETO
CHIEF - MSD

Fund available in the amount of : ₱ 3500.

JEIJEN ROSE CHU-GAVINO 8/16/12
Fiscal Controller III/Fiscal Conroller IV

Approved:

MARJORIE A. CABRIETO
OIC - PRO VI

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

CONFORME:

Myen Belmonte 8-16-12
TRIDON'S VENTURES INC.
(Printed Name & Signature of Supplier/Rep.)