



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**

**PHILHEALTH REGIONAL OFFICE VIII**  
3rd Flr., PhilHealth Bldg. 2, 167 P. Burgos St., Tacloban City  
Tel. Nos. (053) 325-4056; 523-1881 (telefax)  
[www.philhealth.gov.ph](http://www.philhealth.gov.ph); [info.pro8@philhealth.gov.ph](mailto:info.pro8@philhealth.gov.ph)

**NOTICE TO PROCEED**

July 31, 2012

**BRO. DENNIS T. TAYO, OFM**  
Hospital Director  
Our Lady of Porziuncola Hospital, Inc

Dear **Bro. Tayo**:


The attached Contract Agreement having been approved, notice is hereby given to you so that work/delivery of services may commence on the Lease of Office Space for PhilHealth Calbayog Local Health Insurance Office (ITB # 12-07-16), effective on **August 2012 –December 31, 2012.**

Upon receipt of this notice, you are responsible for performing the services under the terms and conditions of the Agreement and in accordance with the Implementation Schedule.

Please acknowledge receipt and acceptance of this notice by signing both copies in the space provided below. Keep one copy and return the other to **PHILIPPINE HEALTH INSURANCE CORPORATION (PHIC) REGIONAL OFFICE 8.**

Thank you.

Very truly yours,

  
**WALTER R. BACAREZA**  
Regional Vice-President

I acknowledge receipt of this Notice on 08/08/2012  
Name of the representative of the Bidder: BRO. DENNIS T. TAYO, OFM, MD  
Authorized Signature: 