

Republic of the Philippines
Philippine Health Insurance Corporation
 PHILHEALTH REGIONAL OFFICE - CORDILLERA ADMINISTRATIVE REGION
 Management Services Division
 4/F SSS Bldg., Harrison Road, Baguio City
 Tel. # (074) 444-9862 / 444-8361 / 446-0371

PURCHASE ORDER

Supplier: <u>Libra Medical Supply</u>	P.O. No.: <u>P-12-122</u>
Address: <u>Magsaysay Ave., Baguio City</u>	Date: <u>26-Dec-12</u>
Tel./Fax No.: <u>300-1953; (075)515-7401</u>	Term/s of Payment: <u>on account</u>
Supplier Registered with: _____	Mode of Procurement: <u>Small Value</u>

Please deliver to this office within 3 days from receipt hereof the following:

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	4	set	Medical First Aid Kit	5,988.00	23,952.00
			Includes:		
			> Utility Box w/ multiple divisions, large		
			> Aneroid Sphygmomanometer, Baxtel		
			> Stethoscope, Baxtel		
			> Digital Thermometer		
			> Mini Otoscope		
			> Penlight		
			> Surgical Scissors, small		
			> Consumable Items & medicines		
2	1	unit	Weighing Scale, Detecto Type	10,800.00	10,800.00
			TOTAL		34,752.00
			Less: 5% Final Tax	1,551.43	
			1% EWT	310.29	1,861.72
			Net of Tax		32,890.28

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 of 1% of the total value of undelivered order for each day of the delay as liquidated damages.
- If the date of receipt of the Purchase Order/P.O. by the dealer is not indicated, it shall be deemed received on the day it was acknowledged to have been received by a representative either through fax or e-mail.
- Delivery Receipt and Sales Invoice shall be required for the one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted at Very truly yours, delivery.
- Payment shall be made in full subject to corresponding government taxes within fifteen (15) working days upon receipt of Certificate of Acceptance and Inspection Report.

Very truly yours,

Imelda Cristeta D. Villamar
IMELDA CRISTETA D. VILLAMAR
 Division Chief, MSD

Certified Budget Available	Funds Available in the amount of	PhP 34,752.00
APPROVED:		
<i>Lilibeth M. Palaci</i> LILIBETH M. PALACI Fiscal Controller II Budget Officer-Dea.	<i>Maria Linda H. Gadingan</i> MARIA LINDA H. GADINGAN Fiscal Controller III	<i>Elvira C. Ver</i> ELVIRA C. VER Regional Vice President
Within the COB: <u>2012</u> Expense Code: <u>276-10</u> Budget: <u>CAO</u> Remarks: _____		

Received Copy of P.O. on <u>10/26/12</u>	CONFORME <i>Link Gutlay</i> LINK GUTLAY Print Name and Signature of Supplier/Representative
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