Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

Lynzee's Bldg., #766 J. Rosales Ave., Butuan City Tel.# 341-1159 / 341-6488 / 342-6992

PURCHASE ORDER

Supplie	r: SANDROS BED & BREAKFAST		P.O. No.:	06-12-136
	s: <u>Pili Drive, Butuan City</u>		Date:	June 29, 2012
	No.:		Mode of	
Supplie	r Registered with: <u>DTI No.</u>		Procurement:	Local Shopping
Gettlemen:				
Please furnish this office the following articles subject to the terms and conditions contained herein:				
Place of Delivery : PhilHealth Regional Office - Caraga Delivery Term : 10 calendar days				
Place of Delivery : PhilHealth Regional Office - Caraga Date of Delivery : 2, 2012		Payment Term : COD		
Date of	20.110.1y			
Unit	ITEMS DESCRIPTION	QTY.	UNIT COST	AMOUNT
room	De Luxe Room (period covered: July 2 & 5, 2012) - Two (2) separate beds, fully airconditioned	1	895.00	1,790.00
	- with TV and ref			
	Less: WVAT gross/1.12 x 5% 79.91 EWT gross/1.12 x 2% <u>31.96</u>			111.87
	LYY1 91033/1.12 \ 270 <u>01.00</u>			1,678.13
	LETHELTHE COS SOLV			
	WITHIN THE EOS ZOPZ			
	Note: MARCELITO MAGTIRAY If services deviate or herovorthe unit selon mentioned above, Ph	ilHealth		
	shall pay based on actual, computed at per room rate	Tround to		
	, , ,)			
	DIV.W. 40. 00. 405. 444. 6/08/42			
(Amou	RIV# 12-06-195 dtd. 6/28/12 Int in Words) ONE THOUSAND SEVEN HUNDRED NINET	Y PESC	SONLY	
In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10)				
of one (1) percent of every day of delay shall be imposed.				
			APPROVED	lh/
			Ld 1	NY CONTRACTOR
				YY. SYCHUA / Vice President
	CONFORME:		Head of A	Procuring Entity
				\
	CR-18TAY THAE EWAN	_	₩	V
	Signature over printed name of Supplier		V	
	7-2-12			
	DATE			
Funds Available :				
31103	1 _			40 440 00 (54005)
	A DIOLUT COA MOA		BRO No.: <u>CGA-</u> Amount : <u>P 1,7</u> 9	<u>12-113-06 (MOOE)</u> 90.00
	JULIETA LABARIQUIT, CPA, MBA Fiscal Controller IV		Allount. F 1,13	
L	1 10001 001101111			