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UBLIC OF THE PHILIPPINES Health Insurance Corporation

09 CityState Center Bldg. Shaw Blvd. Brgy. Oranbo, Pasig City TeleFax: 637-3158

PRIOR

JOB ORDER

(Non-Inventoriable Items)

Supplier	FMR CORPORATION			Work Order No. Date: Term of Payment:	13-04-005 April 16, 2013	
Address	45 Don Manuel St., La Loma, Quezon City					
		Telefax No. 742-5980		lode of Procurement:	NP-Lease of Real Property	
Supplier Registered with: PHILHEALTH			As per schedule	Office Or	der No. 0161, s. 2012 proval of the following	

Please deliver to this office within TOTAL UNIT SERVICE DETAILS AMOUNT QTY UNIT PRICE NO. 20.350.00 20,350.00 RENTAL OF 60-SEATER BUS lot to be use for Philhealth Congress and Presidential Legislative Liason Office (PLLO) Development and Consolidation Activity Schedule: April 18, 2013 @ 7:30 AM - Pick-up PHIC, Citystate Bldg., Pasig City - Drop Off to View Park Hotel Tagaytay, Tagaytay City April 19, 2013 @ 1:00 PM - Pick-up to View Park Hotel Tagaytay, Tagaytay City - Drop Off to PHIC, Citystate Bldg., Pasig City 20.350.00 908.48 EWT 5% 1.816.96 GMP 5% 908.48 18,533.04 04-227 RIV # 13-0200 dtd. 04/03/13 PRID-GSBMD - Emily D. Briones

- 1. All buses/coaster to be used shall be provided by the supplier/contractor and it shall be the supplier's responsibility to maintain such buses/coaster in good, safe, working order and in compliance with all laws and regulations applicable thereto.
- 2. All drivers must be appropriately licensed, competent, responsible individuals and shall be employees of the supplier. In the event of default, supplier shall be liable for any expense including but not limited to damages, attorney's fees and court cost.
- 3. Operate the service in accordance with the approved timetable;
- 4. Convey all participants who at the appropriate time are present at such place or places as specified in this Job Order;
- 5. The supplier should not sub-contract the whole or any part the service without prior written consent from the Corporation

Very	cristina Monsalud
Funds Available in the amount of: Pap 20,350.00 Fiscal Controller III Within the COB: Expense Code: Expens	AD III-OIC, Producement Section APPROVED: CHERIE CARMEN B. DIVINA Division Chief, PRSMD HEAD OF THE AGENCY or Authorized Representative
CONFORME: Signature over Printed Name and Position of authorized representative	Received copy of J.O.: