

PUBLIC OF THE PHILIPPINES
PhilHealth Insurance Corporation
709 CityState Center Bldg.
Shaw Blvd. Brgy. Oranbo, Pasig City
Telefax No. 637-3158

PRID-PS-07

PURCHASE ORDER

Supplier: **CITIPAPER, INC.**
Address: Suite 105 Cornfoods Bldg., G. Puyat Ave., Makati City
Tel. Fax No. 812-2445 / 844-5894 Fax No. 817-8372
Supplier Registered with: **PHILHEALTH**

P.O No.: **06-049-13**

Date: June 19, 2013

Term of Payment: On Account

Mode of Procurement: Local Shopping

Office Order No. **0161, s. 2012**

Please deliver to this office within **15 working days** from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	1,916	sets	BOX, Corrugated, plain, 200 lbs., B Flute, HSC, Self-lock, glued joint, Size: Body Size: Body: 14-15/16" x 11-1/4" x 10-3/16" Cover: 16-1/2" x 26-1/8"	29.75	57,001.00
			LESS:		57,001.00
			EWT 1% 508.94		
			GMP 5% 2,544.69		3,053.63
					53,947.37
			RIV # received: 06-279		
			13-0159 dtd. 03/08/13 PRID-PRSM-Dely E. Rxas		

Terms & Conditions:

- The agency shall impose penalty in an amount equivalent to 1/10 on one (1%) percent 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 acknowledge to have been received by a representative either through fax or e-mail
- Delivery of the above item(s) shall be made within the prescribed schedule dates. Supplier are advised to inform Procurement Section at least two (2) days before the delivery. Use of elevator shall only be from 09:00 to 11:30 a.m. and 1:30 to 3:00 p.m. during Mon/Wed/Fri (MWF). All item(s) shall be delivered and accepted by the Procurement Section at 15th Floor, Room 1503 Citystate Ctr. Bldg. Pasig City
- Delivery Receipt and Sales Invoice shall be required for one-time complete delivery of the goods.
- Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of delivery. With provision for a back-up unit in case of repair.
- 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
- Warranty of three (3) months on hidden defects

Very truly yours,

CRISTINA G. MONSALUD

AO III-OIC, Procurement Section

Certified Budget Available: Complete	Funds Available in the amount of: Php57,001.00	APPROVED:
CORAZON M. TABULAO Fiscal Controller III	LILIA R. GARRIDO Fiscal Controller III	CHERIE CARMEN B. DIVINA Division Chief, PRSMD HEAD OF THE AGENCY or Authorized Representative
Within the COB: PR 22/13 Expense Code: 770-00 / HFO: VMAO Budget: 770-00 / PPA: VMAO Remarks: per PRID-PS-07		
CONFORME: Amoroso Jun Amoroso State Signature over Printed Name and Position of authorized representative		Received copy of P.O.: 6/25/13 Date