

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

PRID-PS-07

PURCHASE ORDER

Supplier **ACCENT MICRO TECHNOLOGIES, INC.** P.O No.: **06-053-13**
Address **Unit 1408 Antel Global Corp. Cneter J. Vargas Ave., Ortigas, Pasig City** Date: **June 25, 2013**
Tel.Fax No. **718-7388 loc. 4202 / Fax No. 988-9789** Term of Payment: **On Account**
Supplier Registered with: **PHILHEALTH** Mode of Procurement: **Local Shopping**

Please deliver to this office within **45 working days** Office Order No. **0161, s. 2012**
from receipt hereof the following

NO.	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
1	7	ca	TONER CARTRIDGE For Network Printer Model: Phaser 4600	15,100.00	105,700.00
2	2	ca	TONER CARTRIDGE For Samsung SCX-6555, SCX-D6555A	4,151.00	8,302.00
LESS:					114,002.00
EWT 1% 1,017.88					
GMP 5% 5,089.38					6,107.26
					107,894.74
RIV # received: 06-340					
13-0346 dtd. 06/11/13 PRID-PRSMO - Ely E. Roxas					

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.
- All original and atleast One (1) Year Expiration. Defective, incompatible or non-compliant of goods as to specification when quoted shall be rejected and returned at the time of 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
- Warranty of three (3) months on hidden defects

Very truly yours,

CRISTINA G. MONSALUD

AO III-OIC, Procurement Section

Certified Budget Available: Php114,002.00	Funds Available in the amount of: Php114,002.00	APPROVED:
EDITHA O. RAMASTA Fiscal Controller IV	WILLIE M. BUMACOD Fiscal Controller IV	CHERIE CARMEN B. DIVINA Division Chief, PRSMO HEAD OF THE AGENCY or Authorized Representative
Within the COB: FF 2013	Expense Code: 385-00 / HFO: VARIOUS	
Budget: 9114,002- / HFO: VARIOUS	Remarks: Per PHILHEALTH 5/20/13	
CONFORME:		Received copy of P.O.:
CARLOS MARAQUAD DELIVERY CREW Signature over Printed Name and Position of authorized representative		07-01-13 Date